EXHIBIT N4

DISCHARGE MONITORING REPORTS PENN'S PRESERVE

	HEADER INFORM	IATION					
Ī	Facility ID:	268341	Facility Name:	PENNS PRESERVE STP	Location Address:	2 SUGARTOWN RD, MALVERN PA, 19355-2489	
	Permit Number:	1596405	Monitoring Period:	01/01/2016-01/31/2016	Mailing Address:	688 SUGARTOWN RD, MALVERN PA, 19355-3302	

Sampling Point	001		Stage Code			Final Effluent		No Discharge Indicator	N	
Parameter	Limit Type	Load 1	Load 2	Units	Conc 1	Conc 2	Conc 3	Units	Sample Type	Sample Frequency
oH	Sample Measurement	***	***	***	8.63	***	8.63	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX		Grab	1/month
otal Suspended Solids	Sample Measurement	***	***	***	***	<5.0	<5.0	mg/L	Composite	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month
Flow	Sample Measurement	.006676	***	MGD	***	***	***	***	Measured	Continuous
	Permit Measurement	Monitor & Report Avg Mo	***		***	***	***		Grab	1/month
Fecal Coliform	Sample Measurement	***	***	***	***	<2.0	***	No./100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***		Grab	1/month
Carbonaceous Biochemical Oxygen Demand	Sample Measurement	***	***	***	***	<3.0	<3.0	mg/L	Composite	1/month
CBOD5)	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX		Grab	1/month
Flow	Sample Measurement	.031	.040	MGD	***	***	***	***	Measured	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Metered	Continuous

ATTACHMENT DETAILS			
File Name	Attachment Type	Uploaded Time	Attachment Comment
Effluent Test Results - January 2016.pdf	Other	2016-02-23T14:26:53-05:00	Effluent Test Results - January 2016
Cryptographic Hash Value of File (SHA-512)	E64D4E3924F18DA9049E63AB879	7F58D057C9E21CFCA727ECBE1FFE72	75215BCC34C10347FA02BF038D4272D5CBD9FE94486190BB8041D6F50C86EDA65326B44
DMR Spreadsheet - January 2016.pdf	Other	2016-02-23T14:20:37-05:00	DMR Spreadsheet - January 2016
Cryptographic Hash Value of File (SHA-512)	636B3A84837B13AAD99E5FB2225	2475CDCB372E918D54E4EADBC0ECD3	3EDA55894805937451BA84476B0AB7BC9543CE296706C28631D1524536E3045EA1849E60
Fecal Test Results - January 2016.pdf	Other	2016-02-23T14:31:42-05:00	Fecal Test Results - January 2016
Cryptographic Hash Value of File (SHA-512)	4BC87AE0451493CC044A5E3A3F7	790E85F80E87E36A4D2DAE7DF21D5C0	E36D03956834A99235E22F74AA099D0FB31267888724866C3FD9DA3A76812FA209AD01C
Preliminary Monthly Climate Data - January 2016.pdf	Other	2016-02-23T14:29:28-05:00	Preliminary Monthly Climate Data - January 2016
Cryptographic Hash Value of File (SHA-512)	DDA1F14DBFF8A1D0A486BAA1C6	68013C8FEAE63C95E45007F2A41272BC	C2B91F349A2B5D57180028A313CDAB3C76587458E00A726B08AEE2368FA1932D9BA863DC
Influent Test Results - January 2016 (2 pages).pdf	Other	2016-02-23T14:23:22-05:00	Influent Test Results - January 2016 (2 pages)
Cryptographic Hash Value of File (SHA-512)	D286E515B3BBFC0CF6CD29B9E5	6EA2C4252D6481423757A31B0304082F	-40156EC311083A059D8E7175843953FC94D9DD2B77161989B605E33186F53C0577DE30

PERMIT VI	DLATIONS												
Non Compliance ID	Event Begin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC		Corrective Action		Comments
UNAUTHOR	RISED DISCI	HARGES											
Non Compliance ID	Event Begin Date	Event End Date	Time Discover	red Substa Discha		Location	Volume	Duration	Receiving Waters	Impact Water	On Cause Of Discharge	DEP Notified Comm	ents
OTHER PE	RMIT VIOLA	TIONS											
Non Compliance ID	Stage Code (S	ampling Point		Reported Para	meter	Non Compliar	ice Type	Comments					
27886	Final Effluent(001)		Flow		Sample type no accordance with							
COMMENT	S DETAILS												
Comment						Operator Nam	е					Operator Certification Number	Operator Contact Number
N/A						Matthew Boggs	3					T3293	610-373-6667

SUBMISSION INFORMATION

*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).

Submitted By GreenPort User	STOLTZFUSD	Submitted By Full Name	Danielle Stoltzfus
Email Address	dstoltzfus@yerkes-assoc.com	Document Generated	2/23/2016

	HEADER INFORM	IATION				
Ī	Facility ID:	268341	Facility Name:	PENNS PRESERVE STP	Location Address:	2 SUGARTOWN RD, MALVERN PA, 19355-2489
	Permit Number:	1596405	Monitoring Period:	02/01/2016-02/29/2016	Mailing Address:	688 SUGARTOWN RD, MALVERN PA, 19355-3302

Sampling Point	001		Stage Code			Final Effluent		No Discharge Indicator	Υ	
Parameter	Limit Type	Load 1	Load 2	Units	Conc 1	Conc 2	Conc 3	Units	Sample Type	Sample Frequency
)H	Sample Measurement	***	***	***	***	***	***	S.U.		
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX		Grab	1/month
otal Suspended Solids	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month
Flow	Sample Measurement	***	***	MGD	***	***	***	***		
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo	*	***	***	***		Metered	Continuous
ecal Coliform	Sample Measurement	***	***	***	***	***	***	CFU/100 ml		
	Permit Measurement	***	***		***	200 Geo Mean	***		Grab	1/month
Carbonaceous Biochemical Oxygen Demand	Sample Measurement	***	***	***	***	***	***	mg/L		
CBOD5)	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX		Grab	1/month
Flow	Sample Measurement	***	***	MGD	***	***	***	***		
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Metered	Continuous

ATTACHMENT DETAILS			
File Name	Attachment Type	Uploaded Time	Attachment Comment
DMR Spreadsheet - February 2016.pdf	Other	2016-03-08T08:30:00-05:00	Discharge Monitoring Report for February 2016
Cryptographic Hash Value of File (SHA-512)	C8A144CA4DA04EBA255CA904I	EBCD849F66E7906938885E9228C4561250	09F2D1AF76FBC7CBCA7B8E9888022BA1E935E40F42BD7630500AA71FAF68E84E83FF7A5
Influent Test Results - February 2016 (2 pages).pdf	Other	2016-03-08T08:30:36-05:00	Influent Sample Test Results
Cryptographic Hash Value of File (SHA-512)	C4E66455E1E127B028E454940F	473EF09FF66E42CD74978FE36275FEE9	1B03F9B529F52BBD5E27DCC92FDC5A87CA2049BF68FFEC76BC5C9B56BE5E6372119044
Preliminary Monthly Climate Data - February 2016.pdf	Other	2016-03-08T08:31:12-05:00	Climate Data for February 2016
Cryptographic Hash Value of File (SHA-512)	DA3AE028A9F9039661FA477F9	785361818069DC495AC5F9FBAB4FEEEB8	8514B903F118E8DFABBDC8347C1AE45A1B537E22B3439948B1BE1355F680B0B0722CB7F

DLATIONS													
Event Begin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC		Corrective Action		Со	omments
RISED DISC	HARGES												
Event Begin Date	Event End Date	Time Discove			Location	Volume	Duration	Receiving Waters	Impact Water	t On Cause Of Discharge	DEP Notified	Comments	S
RMIT VIOLA	TIONS												
Stage Code (S	Sampling Point)	Reported Para	ameter	Non Complia	псе Туре	Comments						
S DETAILS													
					Operator Nan	ne					Operator Certi Number	fication	Operator Contact Number
February 2016	3				Matthew Bogg	IS					T3293		610-373-6667
N INFORM	ATION												
	Event Begin Date RMIT VIOLA Stage Code (S	Event Begin Date RISED DISCHARGES Event Begin Event End Date RMIT VIOLATIONS Stage Code (Sampling Point	Event Begin Date RISED DISCHARGES Event Begin Event End Date Time Discover Date RMIT VIOLATIONS Stage Code (Sampling Point) S DETAILS	Event Begin Date RISED DISCHARGES Event Begin Date Event End Date Time Discovered Substrate Discharges RMIT VIOLATIONS Stage Code (Sampling Point) Reported Paragraph Paragraph Paragraph Point Paragraph Point Paragraph Point Paragraph Point Paragraph Point Paragraph Paragraph Point Paragraph Paragraph Paragraph Point Paragraph P	Event Begin Date RISED DISCHARGES Event Begin Date Time Discovered Substance Discharged RMIT VIOLATIONS Stage Code (Sampling Point) Reported Parameter Reported Parameter Reported Parameter	Event Begin Date Parameter Limit Type Reported Value Permitted Value RISED DISCHARGES Event Begin Date Time Discovered Substance Discharged Event Location RMIT VIOLATIONS Stage Code (Sampling Point) Reported Parameter Non Compliant Pebruary 2016 Operator Name Pebruary 2016	Event Begin Date Parameter Limit Type Reported Value Permitted Load Units	Event Begin Date Event End Date	Event Begin Date Parameter Limit Type Reported Value Permitted Load Units Sampling Point ID Cause Of NC	Event Begin Date Date Parameter Limit Type Reported Value Permitted Value Load Units Sampling Point ID Cause Of NC	Event Begin Date Parameter Limit Type Reported Value Permitted Value Load Units Sampling Point ID Cause Of NC Corrective Action	Event Begin Date Parameter Limit Type Reported Value Permitted Value Load Units Sampling Point ID Cause Of NC Corrective Action	Event Begin Date Parameter Limit Type Reported Value Value Value Load Units Sampling Point ID Cause Of NC Corrective Action Cause Of NC

*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).

Submitted By GreenPort User	STOLTZFUSD	Submitted By Full Name	Danielle Stoltzfus
Email Address	dstoltzfus@yerkes-assoc.com	Document Generated	3/8/2016

HEADER IN	IFORMATION				
Facility ID:	268341	Facility Name:	PENNS PRESERVE STP	Location Address:	2 SUGARTOWN RD, MALVERN PA, 19355-2489
Permit Number	er: 1596405	Monitoring Period:	03/01/2016-03/31/2016	Mailing Address:	688 SUGARTOWN RD, MALVERN PA, 19355-3302

Sampling Point	001		Stage Code	Stage Code			nt	No Discharge Indicator	N	
Parameter	Limit Type		Load 1 Load 2		Conc 1	Conc 2	Conc 3	Units	Sample Type	Sample Frequency
H	Sample Measurement	***	***	***	7.6	***	7.6	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX		Grab	1/month
otal Suspended Solids	Sample Measurement	***	***	***	***	9.4	9.4	mg/L	Grab	1/month
	Permit Measurement	t *** ***			***	30 60 Avg Mo IMAX	60 IMAX		Grab	1/month
Flow	Sample Measurement	.025435	.788478	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Metered	Continuous
ecal Coliform	Sample Measurement	***	***	***	***	<2	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***		Grab	1/month
Carbonaceous Biochemical Oxygen Demand	Sample Measurement	***	***	***	***	10.2	10.2	mg/L	Grab	1/month
CBOD5)	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX		Grab	1/month
Flow	Sample Measurement	.032	.039	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Metered	Continuous

ATTACHMENT DETAILS											
File Name	Attachment Type	Uploaded Time	Attachment Comment								
Preliminary Monthly Climate Data - March 2016.pdf	Other	2016-04-21T13:49:45-04:00	Preliminary Monthly Climate Data - March 2016								
Cryptographic Hash Value of File (SHA-512)	1C73D2D5488DEE87A854A7E8B	6277D5555AE7A8AD6DD4518BA79A97	EE311F4E8D4FF3061DE2F5EEC9D9E378DC3239808DEA43B01FA40C1D1A0C27CD2EB77A1DB								
Influent Test Results - March 2016 (2 pages).pdf	Other	2016-04-21T13:49:26-04:00	Influent Test Results - March 2016 (2 pages)								
Cryptographic Hash Value of File (SHA-512)	711A890F44E8840C7EA22677270	04EB8A65D45D31FF8FA3E3ACB116F6	E9B95E391573632E8349271F995ECAA7EECA396417E8E822546ED9E1CC786518BF93CBB7								
Fecal Test Results - March 2016.pdf	Other	2016-04-21T13:49:08-04:00	Fecal Test Results - March 2016								
Cryptographic Hash Value of File (SHA-512)	159BB4F481BC38743369E4819D	EFE044CEFB38E86381E46A09DB63E0	04737328B6FE7BA2DB31A59C5C8C7245B7C366106E14459C027B18F0546875E920F57E3E0								
Effluent Test Results - March 2016.pdf	Other	2016-04-21T13:48:42-04:00	Effluent Test Results - March 2016								
Cryptographic Hash Value of File (SHA-512)	292C63D6FBF2DF49F782CE4A50	C2BEC3279256A53BC2DD537FAFB3F4	D3DB6DCBC0D4713D6A0FD67A1748C5278B59E25ABE8412E548DC57311C8533D42C432BA97								
DMR Spreadsheet - March 2016.pdf	Other	2016-04-21T13:48:20-04:00	DMR Spreadsheet - March 2016								
Cryptographic Hash Value of File (SHA-512)	7D0691BA5419CA09600681DA1B	30A4B6AF4E2842AA75DA6F6281560FA	F1B1158109D062370E40EEA488BC89C4E8314B9BAEB4898434B1F54D46A6B1C40B7FBD7A								

PERMIT VI	DLATIONS														
Non Compliance ID		Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC		Corrective	Action			Comments
UNAUTHOR	RISED DISCI	HARGES			•		•	•			•			-	
Non	Event Begin	Event End Date	Time Discover	red Subst Disch		Location	Volume	Duration	Receiving Waters	Impact Water		use Of scharge	DEP Notified	Comme	ents
OTHER PERMIT VIOLATIONS															
Non Compliance D	Stage Code (S	Sampling Point))	Reported Par	ameter	Non Complian	псе Туре	Comments							
COMMENT	S DETAILS														
Comment						Operator Nam	ie						Operator Certi Number	fication	Operator Contact Number
N/A						Matthew Boggs	S						T3293		610-373-6667
SUBMISSIC	N INFORMA	TION													
															of Pennsylvania. You are submitting signed to assure that qualified

personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).

Submitted By GreenPort User	STOLTZFUSD	Submitted By Full Name	Danielle Stoltzfus
Email Address	dstoltzfus@yerkes-assoc.com	Document Generated	4/21/2016

HEADER INFORM	IATION				
Facility ID:	268341	Facility Name:	PENNS PRESERVE STP	Location Address:	2 SUGARTOWN RD, MALVERN PA, 19355-2489
Permit Number:	1596405	Monitoring Period:	04/01/2016-04/30/2016	Mailing Address:	688 SUGARTOWN RD, MALVERN PA, 19355-3302

Sampling Point		001		Stage Code			Final Effluent		No Discharge Indicator	N
Parameter	Limit Type	Load 1	Load 2	Units	Conc 1	Conc 2	Conc 3	Units	Sample Type	Sample Frequency
)H	Sample Measurement	***	***	***	8.84	***	8.89	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX		Grab	1/month
otal Suspended Solids	Sample Measurement	***	***	***	***	7.0	7.0	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month
Flow	Sample Measurement	.043213	1.296380	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	<2	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***		Grab	1/month
Carbonaceous Biochemical Oxygen Demand	Sample Measurement	***	***	***	***	5.6	5.6	mg/L	Grab	1/month
CBOD5)	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX		Grab	1/month
Flow	Sample Measurement	.031	.053	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Metered	Continuous

ATTACHMENT DETAILS			
File Name	Attachment Type	Uploaded Time	Attachment Comment
Effluent Test Results - April 2016.pdf	Other	2016-05-18T10:35:22-04:00	Effluent Test Results - April 2016
Cryptographic Hash Value of File (SHA-512)	E5709AAA358B8934B09B28010FDE3	3CD58E93CCEFD1059124E3E9AB4611	ED9B3694EC62E7B05A5B09192E7BA1978D1026191D35C94BC1E22FC95608CD2CF50B08
Fecal Test Results - April 2016.pdf	Other	2016-05-18T10:35:57-04:00	Fecal Test Results - April 2016
Cryptographic Hash Value of File (SHA-512)	E234013442616AC2F1B06F9F2DB71	258E5A08757FBC4728271A2A20C5D0	11CF733D5F3E529A74A8A0E1E92E4163AED319DE99D909228EBA7F97A375CCC6EAFF63
Influent Test Results - April 2016 (2 pages).pdf	Other	2016-05-18T10:36:16-04:00	Influent Test Results - April 2016 (2 pages)
Cryptographic Hash Value of File (SHA-512)	2FC4CE2CDAD4DAAB5859C552D4C	F04318EDC1E29B8BC11553217BF157	PBCBAA6813B57BF2017F79229E4666FFEB600A2AA9D775CE57DC7459E1B76D07F38FE345
DMR Spreadsheet - April 2016.pdf	Other	2016-05-18T10:35:02-04:00	DMR Spreadsheet - April 2016
Cryptographic Hash Value of File (SHA-512)	321C4F57D7366EFA3AAD1F6A571D	D8A78D4E4461E3791F5061CE551B07	62782C2B49F5C88ACAFF34C5A045A3FBF154AC35E6F0F0B30E2698B0CE79CEB1991D6A
Preliminary Monthly Climate Data - April 2016.pdf	Other	2016-05-18T10:36:35-04:00	Preliminary Monthly Climate Data - April 2016
Cryptographic Hash Value of File (SHA-512)	B3DEB250E1EDD4FB46115E62D910	FA80DE74711619C62B34ADC86F3ED	5059A01923814F250D43EC50242693FA8CEFE4E1385C8BA6A049028771B7359B6AB0CBA

PERMIT VI	DLATIONS														
Non Compliance ID	Event Begin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC		Correc	tive Action		С	Comments
UNAUTHOR	RISED DISCI	HARGES													
Non Compliance ID	Event Begin Date	Event End Date	Time Discove		ance Event	Location	Volume	Duration	Receiving Waters	Impact Water	-	Cause Of Discharge	DEP Notified Comme		its
OTHER PERMIT VIOLATIONS															
Non Compliance ID	Stage Code (S	Sampling Point)		Reported Pa	ameter	Non Complia	nce Type	Comments							
COMMENT	S DETAILS														
Comment						Operator Name						Operator Certification Number		Operator Contact Number	
N/A						Matthew Boggs							T3293		610-373-6667
SUBMISSIO	N INFORMA	ATION													
official information	Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).														

Submitted By Full Name

Document Generated

Danielle Stoltzfus

5/18/2016

Submitted By GreenPort User

Email Address

STOLTZFUSD

dstoltzfus@yerkes-assoc.com

HEADER INFORM	IATION				
Facility ID:	268341	Facility Name:	PENNS PRESERVE STP	Location Address:	2 SUGARTOWN RD, MALVERN PA, 19355-2489
Permit Number:	1596405	Monitoring Period:	05/01/2016-05/31/2016	Mailing Address:	688 SUGARTOWN RD, MALVERN PA, 19355-3302

Sampling Point		001		Stage Code			Final Effluent		No Discharge Indicator	N
Parameter	Limit Type	Load 1	Load 2	Units	Conc 1	Conc 2	Conc 3	Units	Sample Type	Sample Frequency
)H	Sample Measurement	***	***	***	8.40	***	8.97	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX		Grab	1/month
otal Suspended Solids	Sample Measurement	***	***	***	***	7.0	7.0	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month
Flow	Sample Measurement	.029415	.911850	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***		Grab	1/month
Carbonaceous Biochemical Oxygen Demand	Sample Measurement	***	***	***	***	4.1	4.1	mg/L	Grab	1/month
CBOD5)	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX		Grab	1/month
Flow	Sample Measurement	.032	.039	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Metered	Continuous

ATTACHMENT DETAILS			
File Name	Attachment Type	Uploaded Time	Attachment Comment
Effluent Test Results - May 2016.pdf	Other	2016-06-27T12:52:50-04:00	Effluent Test Results - May 2016
Cryptographic Hash Value of File (SHA-512)	B73FE73CC08A0D188CA091DF18	867D48C2A7AF4604CC6F5F72889A724	480BC02AFFE758E00656452D6DBF660086EE0AE5509228EB6994F656BB02A77D6050A140D
Fecal Test Results - May 2016.pdf	Other	2016-06-27T12:53:39-04:00	Fecal Test Results - May 2016
Cryptographic Hash Value of File (SHA-512)	19D26262E27C60C861A4D523BD	06AEB7F69370C4212BE4DD2DA5FD3A	ACC1BC2651C7C1E7C46CBDB3BF3E53302DB25E3935B291ADA949A9DCC39B794B5C68822EF4
Influent Test Results - May 2016 (2 pages).pdf	Other	2016-06-27T12:54:24-04:00	Influent Test Results - May 2016 (2 pages)
Cryptographic Hash Value of File (SHA-512)	A7BCEE21E85358FD8C0F9D1C4	BAEB2228C739FF4B6C112E244B370C	C096BD2973C37A6CE0E8CD0E5AD1876EA08749048FE7D11471F41D6226B8AD27E5A723391E
DMR Spreadsheet - May 2016.pdf	Other	2016-06-27T12:51:07-04:00	DMR Spreadsheet - May 2016
Cryptographic Hash Value of File (SHA-512)	2C12251DD8DECA557B51ECC92	1EB211DD3AC7BA304088548B81EA47	7A8D096F62957A8430C1A8A94E8B8090E52AEB19038DBA5C73758BF41FE34FC797A9EC5EA2
Preliminary Monthly Climate Data - May 2016.pdf	Other	2016-06-27T12:54:46-04:00	Preliminary Monthly Climate Data - May 2016
Cryptographic Hash Value of File (SHA-512)	987615A946EBCA5611C62111F0I	E5A90B2FADA2570F7BD4CCC280FD4	4F4F29AFC9946133BC2CA68DDDB42773BB51F0059F1601F5BE3784820BCC26481AE5186F5

PERMIT VI	DLATIONS														
Non Compliance ID	Event Begin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC		Corrective	Action		Cor	nments
UNAUTHOR	RISED DISCI	HARGES													
Non Compliance ID	Event Begin Date	Event End Date	Time Discove	red Substa Discha		Location	Volume	Duration	Receiving Waters	Impact Water		use Of charge	DEP Notified	Comments	
OTHER PE	THER PERMIT VIOLATIONS														
Non Compliance ID	Compliance Compliance			ameter	Non Complia	псе Туре	Comments								
COMMENT	S DETAILS														
Comment						Operator Name						Operator Certi Number	fication	Operator Contact Number	
Power to the aerators was lost between Thursday, May 19th and restored on Friday, May 20th Loss of power was approximately 24 hours. No spray took place during this event and the aeration lagoon and storage lagoon are properly sized to minimize any negative effect of the power failure.					Matthew Boggs						T3293		610-373-6667		
SUBMISSIC	N INFORMA	ATION													

*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).

Submitted By GreenPort User	, 	Submitted By Full Name	Danielle Stoltzfus
Email Address	dstoltzfus@yerkes-assoc.com	Document Generated	6/27/2016

HEADER IN	NFORMATION				
Facility ID:	268341	Facility Name:	PENNS PRESERVE STP	Location Address:	2 SUGARTOWN RD, MALVERN PA, 19355-2489
Permit Numbe	er: 1596405	Monitoring Period:	06/01/2016-06/30/2016	Mailing Address:	688 SUGARTOWN RD, MALVERN PA, 19355-3302

Sampling Point		001		Stage Code			Final Effluer	nt	No Discharge Indicator	N
Parameter	Limit Type	Load 1	Load 2	Units	Conc 1	Conc 2	Conc 3	Units	Sample Type	Sample Frequency
Н	Sample Measurement	***	***	***	8.2	***	8.2	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX		Grab	1/month
otal Suspended Solids	Sample Measurement	***	***	***	***	5	5	mg/L	Composite	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month
Flow	Sample Measurement	.039	1.22	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Metered	Continuous
ecal Coliform	Sample Measurement	***	***	***	***	1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***	7	***	200 Geo Mean	***		Grab	1/month
Carbonaceous Biochemical Oxygen Demand	Sample Measurement	***	***	***	***	3	3	mg/L	Composite	1/month
CBOD5)	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX		Grab	1/month
Flow	Sample Measurement	.030	.039	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Metered	Continuous

ATTACHMENT DETAILS			
File Name	Attachment Type	Uploaded Time	Attachment Comment
Influent Test Results - June 2016 (2 pages).pdf	Other	2016-07-28T15:52:36-04:00	Influent Test Results - June 2016 (2 pages)
Cryptographic Hash Value of File (SHA-512)	80031643F445DC53D39D7BAAD94	4FAD57DB6742FD6986ED38A704B44A	02B7CF361339B12333C647302CB006CD60C644DADBAAB3BDAFD972163A78058584E1C6FA
DMR Spreadsheet - June 2016.pdf	Other	2016-07-28T16:00:17-04:00	DMR Spreadsheet - June 2016
Cryptographic Hash Value of File (SHA-512)	58D67BE5ADF6CA15599380ACD1	0FBFAB5BA7A15E0696D31401775896A	AC46A968BF39921D7C0ECC02B6299AAFEB99780D04629176DE305E5213220031212094DE
Preliminary Monthly Climate Data - June 2016.pdf	Other	2016-07-28T16:00:54-04:00	Preliminary Monthly Climate Data - June 2016
Cryptographic Hash Value of File (SHA-512)	01B4F997663D805807277324242E	259BB127F775B95B8925CE436BE78F	7D6F7EFC6835B55DE4A2B3B7091F165F572AFEFA58629D1677D6B5758F8C814180B5F4
Effluent Test Results - June 2016.pdf	Other	2016-07-28T15:50:28-04:00	Effluent Test Results - June 2016
Cryptographic Hash Value of File (SHA-512)	8BD12A1CE348C49BA6CD503EAA	AB833457C84AF7F1E2259F78FA7F5190	C9EA09C3D5A581F0C3AAB557C7F1DDEE8FE35A60D9FC93610C4DDD007708241B96F03938
Fecal Test Results - June 2016.pdf	Other	2016-07-28T15:51:07-04:00	Fecal Test Results - June 2016
Cryptographic Hash Value of File (SHA-512)	5EF51E37D518FB287535FFFC2DE	DFCF8A99FA694DB0CEA28F12182BD0	9FF0152C8489DAFC3E6D2058269A93A0973F750A44FA877E280451BAD3413887F0B5ECED

PERMIT VI	DLATIONS														
Non Compliance ID	Event Begin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC		Corrective A	ction			Comments
UNAUTHO	RISED DISC	HARGES													
Non Compliance ID	Event Begin Date	Event End Date	Time Discover	red Substa		Location	Volume	Duration	Receiving Waters	Impact Water		se Of harge	DEP Notified	Comme	nts
OTHER PE	RMIT VIOLA	TIONS													
Non Compliance ID	Stage Code (S	Sampling Point)	Reported Para	ameter	Non Complian	nce Туре	Comments							
COMMENT	S DETAILS														
Comment						Operator Nam	ne						Operator Certi Number	fication	Operator Contact Number
June DMR Rep	oort 2016			Matthew Boggs							192623		6103736667		
SUBMISSIO	UBMISSION INFORMATION														
official infor	Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting fficial information. You certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified ersonnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the														

information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).

Submitted By GreenPort User	MATTHEWB	Submitted By Full Name	Boggs Matthew
Email Address	mboggs@entecheng.com	Document Generated	7/28/2016

HEADER INFORM	IATION					
Facility ID:	268341	Facility Name:	PENNS PRESERVE STP	Location Address:	2 SUGARTOWN RD, MALVERN PA, 19355-2489	
Permit Number:	1596405	Monitoring Period:	07/01/2016-07/31/2016	Mailing Address:	688 SUGARTOWN RD, MALVERN PA, 19355-3302	

Sampling Point		001		Stage Code			Final Efflue	nt	No Discharge Indicator	N
Parameter	Limit Type	Load 1	Load 2	Units	Conc 1	Conc 2	Conc 3	Units	Sample Type	Sample Frequency
)H	Sample Measurement	***	***	***	7.79	***	7.79	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX		Grab	1/month
otal Suspended Solids	Sample Measurement	***	***	***	***	5.0	5.0	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month
Flow	Sample Measurement	.020348	.630790	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***		Grab	1/month
Carbonaceous Biochemical Oxygen Demand	Sample Measurement	***	***	***	***	4.8	4.8	mg/L	Grab	1/month
CBOD5)	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX		Grab	1/month
Flow	Sample Measurement	.027	.032	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Metered	Continuous

ATTACHMENT DETAILS			
File Name	Attachment Type	Uploaded Time	Attachment Comment
Effluent Test Results - July 2016.pdf	Other	2016-08-25T15:42:50-04:00	Effluent Test Results - July 2016
Cryptographic Hash Value of File (SHA-512)	094208EA5C7BFD0B49C310EFFE6	18CFCA3CC35ADBFD03DE2F448B83B	E87F03B6764038D85640DBB14DC660E9087994EF4858757FE7F64C68CC56E1DFF199A542
Influent Test Results - July 2016 (2 pages).pdf	Other	2016-08-25T15:41:58-04:00	Influent Test Results - July 2016
Cryptographic Hash Value of File (SHA-512)	A59F4C8886BFB204657E12EEF954	2FEC258803C3C3A036F855C0286FEA	B6EEF8C30621E2ACB96AAB879F629A2EC0FB7636387B96531689AB3B4D77E9DB94CB65
Preliminary Monthly Climate Data - July 2016.pdf	Other	2016-08-25T15:44:55-04:00	Preliminary Monthly Climate Data - July 2016
Cryptographic Hash Value of File (SHA-512)	AA5D602DAB166C01442E51E26122	26992A5376CFC71C0775011CFF11363	3001E08F94B5E5553EC97EDF13BD61C961CA4885D2614C0D3A1905D561BABEE050A111
DMR Spreadsheet - July 2016.pdf	Other	2016-08-25T15:40:16-04:00	DMR Spreadsheet - July 2016
Cryptographic Hash Value of File (SHA-512)	D5FE397C6B4F01B0B567BD3FD83	EF4B228C90C961B280392D486B2F6D	35E48055099140B401A004867EE44BFDA4D579A5E049B7AF924D25AA9834E8CAAAEACB0
Fecal Test Results - July 2016.pdf	Other	2016-08-25T15:43:52-04:00	Fecal Test Results - July 2016
Cryptographic Hash Value of File (SHA-512)	1E1AFDF8D26022320F77F7E885C2	2154E69C79D9142FD75FC626C645615	8FB5E44AABE4F43571D2E3AFBE2111739A9BAF4C1DC354628FE38D4042B43EBFD8965E

PERMIT VI	OLATIONS															
Non Compliance ID	Event Begin Date	Event End Date	Parameter	Limit Type	Report Value	ed	Permitted Value	Load Units	Sampling Point ID	Cause Of NC		Corre	ctive Action		Commen	nts
UNAUTHOR	RISED DISCI	HARGES														
Non Compliance ID	Event Begin Date	Event End Date	Time Discove		tance narged	Event I	Location	Volume	Duration	Receiving Waters	Impact Water	t On	Cause Of Discharge	DEP Notified Comm	ents	
OTHER PE	RMIT VIOLA	TIONS														
Non Compliance ID	Stage Code (S	Sampling Point)	Reported Pa	rameter		Non Compliar	nce Type	Comments							
COMMENT	S DETAILS															
Comment							Operator Nam	е						Operator Certification Number	0	perator Contact Number
N/A							Matthew Boggs	S						T3293	6	10-373-6667
SUBMISSIO	ON INFORMA	ATION														
official information of the personnel g	mation. You oather and eva	certify under aluate the inf	penalty of lave formation sub	v that this d mitted. Bas	ocument ed on yo	and a	II attachmen uiry of the pe	ts were preperson or pers	ared under y ons who ma	our direction on age the syst	or supe em or t	ervisio those ¡	n in accordar persons direc	nce with a system de tly responsible for g	esigned t athering	nsylvania. You are submitting to assure that qualified the information, the al penalties, including 18 P.S.

Submitted By Full Name

Document Generated

Danielle Stoltzfus

8/25/2016

section 4904 (relating to unsworn falsification to authorities).

STOLTZFUSD

dstoltzfus@yerkes-assoc.com

Submitted By GreenPort User

Email Address

HEADER INFOR	MATION				
Facility ID:	268341	Facility Name:	PENNS PRESERVE STP	Location Address:	2 SUGARTOWN RD, MALVERN PA, 19355-2489
Permit Number:	1596405	Monitoring Period:	08/01/2016-08/31/2016	Mailing Address:	688 SUGARTOWN RD, MALVERN PA, 19355-3302

Sampling Point		001		Stage Code			Final Efflue	nt	No Discharge Indicator	N	
Parameter	Limit Type	Load 1	Load 2	Units	Conc 1	Conc 2	Conc 3	Units	Sample Type	Sample Frequency	
)H	Sample Measurement	***	***	***	7.25	***	7.60	S.U.	Grab	1/month	
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX		Grab	1/month	
otal Suspended Solids	Sample Measurement	***	***	***	***	16.5	16.5	mg/L	Grab	1/month	
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month	
Flow	Sample Measurement	.038460	1.192250	MGD	***	***	***	***	Metered	Continuous	
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Metered	Continuous	
Fecal Coliform	Sample Measurement	***	***	***	***	1	***	CFU/100 ml	Grab	1/month	
	Permit Measurement	***	***		***	200 Geo Mean	***		Grab	1/month	
Carbonaceous Biochemical Oxygen Demand	Sample Measurement	***	***	***	***	<3	<3	mg/L	Grab	1/month	
CBOD5)	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX		Grab	1/month	
Flow	Sample Measurement	.026	.036	MGD	***	***	***	***	Metered	Continuous	
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Metered	Continuous	

ATTACHMENT DETAILS			
File Name	Attachment Type	Uploaded Time	Attachment Comment
DMR Spreadsheet - August 2016.pdf	Other	2016-09-28T15:28:43-04:00	N/A
Cryptographic Hash Value of File (SHA-512)	9175F61569EBBAA7A48B096BFBD	7E9C20E64BA0BEFF2CA7CEA2F3D5A	AEB4D2A5DD25C965F0D71A054380449284A1EC86ABC752D8404ACD9F5DCE616F6C0B597B
Preliminary Monthly Climate Data - August 2016.pdf	Other	2016-09-28T15:30:41-04:00	N/A
Cryptographic Hash Value of File (SHA-512)	3EE9CCA61D789BC60C673C80A40	AF910B253B90CFC34A11EE2065E8EC	9CB4E8C9D7AA81E0A48B8294BE8E2E8BF43939516FE37351A137E38D9296BE1F995C407
Influent Test Results - August 2016 (2 pages).pdf	Other	2016-09-28T15:30:02-04:00	N/A
Cryptographic Hash Value of File (SHA-512)	895BE5170389D8AE79D27840880B	ACEA137D0D6CD51A4C434A372BF062	276E8266C9E3E74ADD0C4101D0FA4FD14083AB6BCC87FD45C6A9A5158CB0E6BFDDA9AB7
Fecal Test Results - August 2016.pdf	Other	2016-09-28T15:29:38-04:00	N/A
Cryptographic Hash Value of File (SHA-512)	DE5C57383E6A2A328E5796C38062	F7E7541C8B93AE238E077FD130AC54	8A4CF4B96BA1F9F5275D06E434EAE5A35A65FDC6C860795847409E35386A3074EBE177
Effluent Test Results - August 2016.pdf	Other	2016-09-28T15:29:09-04:00	N/A
Cryptographic Hash Value of File (SHA-512)	BEE62195408CCA3B54AA87D0FE4	37B72F19B8D0FC3E767CF74EB3FC5A	

PERMIT VIC	LATIONS														
		Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC		Correct	ive Action		C	comments
UNAUTHOR	RISED DISCH	HARGES													
		Event End Date	Time Discover	red Substa Discha		Location	Volume	Duration	Receiving Waters	Impact Water		Cause Of Discharge	DEP Notified	Commer	its
OTHER PER	RMIT VIOLA	TIONS													
Non Compliance ID	Stage Code (S	ampling Point)		Reported Para	nmeter	Non Complian	се Туре	Comments							
COMMENTS	DETAILS														
Comment						Operator Nam	е						Operator Certi Number	fication	Operator Contact Number
N/A						Matthew Boggs	S						T3293		610-373-6667
SUBMISSIO	N INFORMA	TION													
															f Pennsylvania. You are submitting igned to assure that qualified

*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).

Submitted By GreenPort User	STOLTZFUSD	Submitted By Full Name	Danielle Stoltzfus
Email Address	dstoltzfus@yerkes-assoc.com	Document Generated	9/28/2016

HEADER IN	FORMATION				
Facility ID:	268341	Facility Name:	PENNS PRESERVE STP	Location Address:	2 SUGARTOWN RD, MALVERN PA, 19355-2489
Permit Number	r: 1596405	Monitoring Period:	09/01/2016-09/30/2016	Mailing Address:	688 SUGARTOWN RD, MALVERN PA, 19355-3302

Sampling Point		001		Stage Code			Final Effluent		No Discharge Indicator	N
Parameter	Limit Type	Load 1	Load 2	Units	Conc 1	Conc 2	Conc 3	Units	Sample Type	Sample Frequency
ρΗ	Sample Measurement	***	***	***	8.19	***	8.58	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX		Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	8.6	8.6	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month
Flow	Sample Measurement	.012122	.363670	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	26.7	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***	7	***	200 Geo Mean	***		Grab	1/month
Carbonaceous Biochemical Oxygen Demand	Sample Measurement	***	***	***	***	<3.0	<3.0	mg/L	Grab	1/month
CBOD5)	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX		Grab	1/month
Flow	Sample Measurement	.025	.036	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Metered	Continuous

ATTACHMENT DETAILS							
File Name	Attachment Type	Uploaded Time	Attachment Comment				
Effluent Test Results - September 2016.pdf	Other	2016-10-27T15:16:00-04:00	Effluent Test Results - September 2016				
Cryptographic Hash Value of File (SHA-512)	07ABB5C6EA01667968109A983A5EB	88E76F472DC087E5F3892188EE5F33E	E44984E03954818C9ED0BC40AA2AE798599550217432014A01BA2C7905FBCEF6CFB0B2				
Fecal Test Results - September 2016.pdf	Other	2016-10-27T15:18:28-04:00	Fecal Test Results - September 2016				
Cryptographic Hash Value of File (SHA-512)	1ECE3C5A064F1F8FF479362821DAD	D5ADC84F516F91E4C36AADDBA1BED	0043EC04E77247B0F9CB19D2D63DA266315F5D6EB051BFD699BFC9802AF01055FA256A83				
nfluent Test Results - September 2016 (2 pages).pdf	Other	2016-10-27T15:17:39-04:00	Influent Test Results - September 2016 (2 pages)				
Cryptographic Hash Value of File (SHA-512)	8A03D4ADBFEB0112AC19E5E31E30	C518C43053DD8EF1DC31A21C5E8C6	FC57CA63387ECCA043FD26115CC81B42DA4125EB5C880D8F1BCEBF3F1A48344AA9AF7C9				
DMR Spreadsheet - September 2016.pdf	Other	2016-10-27T15:15:32-04:00	DMR Spreadsheet - September 2016				
Cryptographic Hash Value of File (SHA-512)	712B9A958441A3CC7D302169EE8F3	41A8222D1BCD9AE2B3B6EE71FC091	35A2EB8BD2527B64260FB2C257392F79EA6A370124884710934CC34313F7A7F2F3735F				
Preliminary Monthly Climate Data - September 2016.pdf Other 2016-10-27T15:20:13-04:00 Preliminary Monthly Climate Data - September 2016							
Cryptographic Hash Value of File (SHA-512)	9EA666856277A0138A6AFBA498B0EC04301938B97D6A578A0476AD734220A846D974C2E04E979D074F70E199C365606216C56393F792992C2A53EA08BCC7C696						

PERMIT VIO	DLATIONS													
Non Compliance ID	Event Begin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC		Corrective Action		С	omments
UNAUTHOR	RISED DISC	HARGES												
Non Compliance ID	Event Begin Date	Event End Date	Time Discover	red Substa Discha	l l	Location	Volume	Duration	Receiving Waters	Impact Water		DEP Notified	Commen	ts
OTHER PE	RMIT VIOLA	TIONS												
Non Compliance ID					Non Complian	nce Type	Comments							
COMMENT	S DETAILS													
Comment						Operator Name						Operator Certi Number	fication	Operator Contact Number
N/A						Matthew Bogg	S					T3293		610-373-6667
SUBMISSIC	N INFORMA	ATION												
														f Pennsylvania. You are submitting gned to assure that qualified

*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).

come is a constant to an			
Submitted By GreenPort User	STOLTZFUSD	Submitted By Full Name	Danielle Stoltzfus
Email Address	dstoltzfus@yerkes-assoc.com	Document Generated	10/27/2016



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

10

01

TO

2016

YEAR

2016

FROM

001
OUTFALL NUMBER

Reorting Frequency:
DMR Effective From:
DMR Effective To:

Monthly 10/01/2016 10/31/2016

MONITORING PERIOD

MO DAY

YEAR MO DAY

Permit Expires:
Permit Application Due
No Discharge?

10

31

02/29/2020 11/28/2016 No

PARAMETERS REPORTED VALUES

PARAMETER		QUA	NTITY OR LOAD	DING	C	UANTITY OR C	ONCENTRATIO	ON	SAMPLE TYPE	SAMPLE FREQUENCY	
FARAIVIETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAWIFLE TIFE	SAIVII LE I NEQUENCT	
рН	Sample Measurement	***	***	***	7.91	***	7.91	S.U.	Grab	1/month	
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX	1 [Grab	1/month	
Total Suspended Solids	Sample Measurement	***	***	***	***	6.4	6.4	mg/L	Grab	1/month	
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX	1	Grab	1/month	
Flow	Sample Measurement	.029952	.928510	MGD	***	***	***	***	Metered	Continuous	
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***	1	Metered	Continuous	
Fecal Coliform	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	Grab	1/month	
	Permit Measurement	***	***		***	200 Geo Mean	***] [Grab	1/month	
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	<3.0	<3.0	mg/L	Grab	1/month	
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX] [Grab	1/month	
Flow	Sample Measurement	.025	.034	MGD	***	***	***	***	Metered	Continuous	
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***	1 [Metered	Continuous	
Facility Comments		•			•	•				-	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
Influent Test Results - October 2016 (2 pages).pdf	Other	2016-11-28T14:16:05-05:00	Influent Test Results - October 2016 (2 pages)
Effluent Test Results - October 2016.pdf	Other	2016-11-28T14:16:29-05:00	Effluent Test Results - October 2016
Copy of Copy of 2016-DMR Spreadsheet (003).pdf	Other	2016-11-28T14:17:30-05:00	Copy of Copy of 2016-DMR Spreadsheet (003)
SSO_report_form.Oct112016.pdf	Other	2016-11-28T14:19:50-05:00	SSO Report Form Penns Preserve, 10-11-2016
Fecal Test Results - October 2016.pdf	Other	2016-11-28T14:16:49-05:00	Fecal Test Results - October 2016
Preliminary Monthly Climate Data - October 2016.pdf	Other	2016-11-28T14:17:09-05:00	Preliminary Monthly Climate Data - October 2016

PERMIT VIOLATIONS

Non Compli	ance Event Begin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Comments
ID.	1	1					1				

UNAUTHORISED DISCHARGES

Non Compliance Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Pocciving Waters Im	mpact On Water	Cause Of	DEP Notified	Comments
Non Compliance Event begin bate	Lveni Liiu Date	Tillie Discovered	Jubstance	L Veni Location	Volume	Duration	Receiving waters III	inpact On water	Cause Oi	DEF Notified	Comments
l ID I			Discharged				I I		Discharge		

OTHER PERMIT VIOLATIONS

Γ	Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments
	37066			Other	SSO Report to PADEP - Clean Water Program - see attachment

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
Please see attached Sanitary Sewer Overflow Report Form - Penns Preserve, 10-11-2016	Matthew Boggs	T3293	610-373-6667

SUBMISSION INFORMATION

SUBMITTED BY GREENPORT USER		Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2016	11	28
STOLTZFUSD	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

001
OUTFALL NUMBER

Reorting Frequency:
DMR Effective From:
DMR Effective To:
Permit Expires:

Monthly
11/01/2016
11/30/2016

MONITORING PERIOD

 YEAR
 MO
 DAY

 FROM
 2016
 11
 01

YEAR MO DAY
TO 2016 11 30

Permit Application Due No Discharge?

02/29/2020 12/28/2016 No

PARAMETERS REPORTED VALUES

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIC	DN	SAMPLE TYPE	SAMPLE FREQUENC
LANAMETEN		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMI LE TITE	SAMI LE I NEQUENO
рН	Sample Measurement	***	***	***	8.37	***	8.37	S.U.	Grab	1/month
	Permit Measurement	***	***	1	6.0 Inst Min	***	9.0 IMAX	[Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	5.6	5.6	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month
Flow	Sample Measurement	.015364	.460930	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***	Ι Γ	Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	<3	<3	mg/L	Grab	1/month
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX	Ι Γ	Grab	1/month
Flow	Sample Measurement	.027	.037	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***	1	Metered	Continuous
Facility Comments		1			•		•			•



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
Copy of 2016-DMR Spreadsheet - November Final.pdf	Other	2016-12-23T11:15:10-05:00	2016-DMR Spreadsheet - November Final
Effluent Test Results - November 2016.pdf	Other	2016-12-23T11:15:31-05:00	Effluent Test Results - November 2016
Influent Test Results - November 2016 (2 pages).pdf	Other	2016-12-23T11:16:11-05:00	Influent Test Results - November 2016 (2 pages)
Preliminary Monthly Climate Data - November 2016.pdf	Other	2016-12-23T11:16:31-05:00	Preliminary Monthly Climate Data - November 2016
Fecal Test Results - November 2016.pdf	Other	2016-12-23T11:15:51-05:00	Fecal Test Results - November 2016

PERMIT VIOLATIONS

- [Non Compliance	Event Regin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Commonts
	Non Compliance	Lveni begin bate	LVEIIL LIIU Date	Farainetei	Lilling Type	Neported value	reminited value	Luau uiilis	Jamping Font ib	Cause Of NC	Corrective Action	Comments
	ID.	_				1	l .		' '			
			l				l					

UNAUTHORISED DISCHARGES

Non Compliance Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Receiving Waters Impact	ct On Water Cause	Of DEP Notified	Comments
l ID			Discharged				1 .	Discha	rge	

OTHER PERMIT VIOLATIONS

Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
No comments	Matthew Boggs	T3293	610-373-6667

SUBMISSION INFORMATION

SUBMITTED BY GREENPORT USER	, , , , ,	Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2016	12	23
STOLTZFUSD	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

MONITORING PERIOD

TO

YEAR

2016

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

МО

12

YEAR

2016

FROM

DAY

01

OUTFALL NUMBER

MO

12

DAY

31

DMR Effective From: 12/0
DMR Effective To: 12/3
Permit Expires: 02/2
Permit Application Due 09/0
No Discharge? No

Reorting Frequency:

Monthly
12/01/2016
12/31/2016
02/29/2020
09/02/2019

PARAMETERS REPORTED VALUES

PARAMETER		QUA	NTITY OR LOAD	DING	C	UANTITY OR C	ONCENTRATIC	ON	SAMPLE TYPE	SAMPLE FREQUENC
FARAINLILK		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLE TIPE	SAWIFLE PREQUENC
рН	Sample Measurement	***	***	***	8.07	***	8.07	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX	[Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	5	5	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX	[Grab	1/month
Flow	Sample Measurement	.007146	.221520	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***	[Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	62	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***	Ι Γ	Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	<3	<3	mg/L	Grab	1/month
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX		Grab	1/month
Flow	Sample Measurement	.029	.036	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***	1	Metered	Continuous
Facility Comments		•					•			•



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
Preliminary Monthly Climate Data - December 2016.pdf	Other	2017-01-25T22:10:26-05:00	Preliminary Monthly Climate Data - December 2016
Influent Test Results - December 2016 (2 pages).pdf	Other	2017-01-25T22:09:52-05:00	Influent Test Results - December 2016 (2 pages)
Fecal Test Results - December 2016.pdf	Other	2017-01-25T22:09:11-05:00	Fecal Test Results - December 2016
Effluent Test Results - December 2016.pdf	Other	2017-01-25T22:08:38-05:00	Effluent Test Results - December 2016
2016-DMR Spreadsheet - December 2016.pdf	Other	2017-01-25T22:08:05-05:00	2016-DMR Spreadsheet - December 2016

PERMIT VIOLATIONS

- [Non Compliance	Event Regin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Commonts
	Non Compliance	Lveni begin bate	LVEIIL LIIU Date	Farainetei	Lilling Type	Neported value	reminited value	Luau uiilis	Jamping Font ib	Cause Of NC	Corrective Action	Comments
	ID.	_				1	l .		' '			
			l				l					

UNAUTHORISED DISCHARGES

Non Compliance	Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of	DEP Notified	Comments
ID				Discharged						Discharge		

OTHER PERMIT VIOLATIONS

_					
	Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	610-373-6667

SUBMISSION INFORMATION

SUBMITTED BY GREENPORT USER	electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a	Danielle Stoltzfus	TELEPHO	NE	DATE		
	system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of		AREA CODE	NUMBER	2017	1	25
STOLTZFUSD	the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

FROM

001
OUTFALL NUMBER

Reorting Frequency:
DMR Effective From:
DMR Effective To:
Permit Expires:

Monthly
01/01/2017
01/31/2017
02/29/2020

 MONITORING PERIOD

 YEAR
 MO
 DAY
 YEAR
 MO
 DAY

 2017
 01
 01
 TO
 2017
 01
 31

Permit Application Due No Discharge?

09/02/2019 No

PARAMETERS REPORTED VALUES

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	NO	SAMPLE TYPE	SAMPLE FREQUENCY
TANAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	ONIVII EL TTT E	SAWI LE I REQUENCT
рН	Sample Measurement	***	***	***	7.14	***	7.82	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX] [Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	9	9	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month
Flow	Sample Measurement	.003917	.121440	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***] [Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***] [Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	3	3	mg/L	Grab	1/month
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX]	Grab	1/month
Flow	Sample Measurement	.029	.041	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***] [Metered	Continuous
Facility Comments		•			•	•	•			•



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
January 2017-DMR Spreadsheet.pdf	Other	2017-02-27T14:01:14-05:00	January 2017-DMR Spreadsheet
Fecal Test Results - January 2017.pdf	Other	2017-02-27T14:00:29-05:00	Fecal Test Results - January 2017
Effluent Test Results - January 2017.pdf	Other	2017-02-27T14:00:02-05:00	Effluent Test Results - January 2017
Preliminary Monthly Climate Data - January 2017.pdf	Other	2017-02-27T14:01:39-05:00	Preliminary Monthly Climate Data - January 2017
Influent Test Results - January 2017 (2 pages).pdf	Other	2017-02-27T14:00:52-05:00	Influent Test Results - January 2017 (2 pages)

PERMIT VIOLATIONS

Non Compliance Event Begin Date Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Comments
Non Compliance Event Begin Bate Event Ena Bate	i didilictoi	Lilling Type	I Reported Value	i cililitica value	Loud Office	oumping rount is	oudse of No	CONTROLITE ACTION	Comments
ID									

UNAUTHORISED DISCHARGES

Non Compliance	Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of	DEP Notified	Comments
ID				Discharged						Discharge		

OTHER PERMIT VIOLATIONS

_					
	Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	610-373-6667

SUBMISSION INFORMATION

SUBMITTED BY GREENPORT USER	*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a	Danielle Stoltzfus	TELEPHO	DATE			
	system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of		AREA CODE	NUMBER	2017	2	27
STOLTZFUSD	the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

001
OUTFALL NUMBER

MO

02

DAY

28

Reorting Frequency:

DMR Effective From:

DMR Effective To:

Monthly 02/01/2017 02/28/2017

DMR Effective To:

Permit Expires: 02/29/2020
Permit Application Due 09/02/2019

09/02/2019 No

YEA

YEAR MO DAY
2017 02 01 TO

No Discharge?

PARAMETERS REPORTED VALUES

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	ON	SAMPLE TYPE	SAMPLE FREQUENC	
LANAMETEN		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAIVII LL TITL	3/ WII 22 R2 Q32 N3	
рН	Sample Measurement	***	***	***	7.85	***	7.85	S.U.	Grab	1/month	
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX	<u> </u>	Grab	1/month	
Total Suspended Solids	Sample Measurement	***	***	***	***	6.6	6.6	mg/L	Grab	1/month	
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month	
Flow	Sample Measurement	.011478	.355810	MGD	***	***	***	***	Metered	Continuous	
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Metered	Continuous	
Fecal Coliform	Sample Measurement	***	***	***	***	-1	***	CFU/100 ml	Grab	1/month	
	Permit Measurement	***	***		***	200 Geo Mean	***		Grab	1/month	
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	<3	<3	mg/L	Grab	1/month	
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX		Grab	1/month	
Flow	Sample Measurement	.027	.040	MGD	***	***	***	***	Metered	Continuous	
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***	[Metered	Continuous	
Facility Comments		<u> </u>			•		•			•	

MONITORING PERIOD

YEAR

2017



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
2017-DMR Spreadsheet.pdf	Other	2017-03-21T10:09:31-04:00	DMR Spreadsheet - February 2017
Influent Test Results - February 2017 (2 pages).pdf	Other	2017-03-21T10:22:14-04:00	Influent Test Results - February 2017 (2 pages)
Fecal Test Results - February 2017.pdf	Other	2017-03-21T10:24:16-04:00	Fecal Test Results - February 2017
Preliminary Monthly Climate Data - February 2017.pdf	Other	2017-03-21T10:24:43-04:00	Preliminary Monthly Climate Data - February 2017
Effluent Test Results - February 2017.pdf	Other	2017-03-21T10:21:53-04:00	Effluent Test Results - February 2017

PERMIT VIOLATIONS

Non Com	pliance Ever	nt Begin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Comments
ID									J			

UNAUTHORISED DISCHARGES

Non Compliance Event Begin I	te Event End Date	Time Discovered	Substance Discharged	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of Discharge	DEP Notified	Comments

OTHER PERMIT VIOLATIONS

_					
Γ	Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	610-373-6667

SUBMITTED BY GREENPORT USER	, , , , ,	Danielle Stoltzfus	TELEPHO	NE	DATE		
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2017	3	21
STOLTZFUSD	the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: **688 SUGARTOWN RD, MALVERN PA, 19355-3302**

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

МО

03

YEAR

2017

FROM

DAY

01

TO

2017

OUTFALL NUMBER

03

Reorting Frequency: DMR Effective From: DMR Effective To:

Monthly 03/01/2017 03/31/2017

Permit Expires: MONITORING PERIOD Permit Application Due YEAR MO DAY No Discharge?

31

02/29/2020 09/02/2019 Yes

PARAMETER		QUA	NTITY OR LOAD	DING	C	UANTITY OR C	ONCENTRATIO	ON	SAMPLE TYPE	SAMPLE FREQUENCY
FARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAWIFLE TIFE	SAWFLE FREQUENCY
рН	Sample Measurement	***	***	***	***	***	***	S.U.		
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX] [Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX	1 [Grab	1/month
Flow	Sample Measurement	***	***	MGD	***	***	***	***		
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***] [Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	***	***	CFU/100 ml		
	Permit Measurement	***	***		***	200 Geo Mean	***		Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX		Grab	1/month
Flow	Sample Measurement	***	***	MGD	***	***	***	***		
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***] [Metered	Continuous
Facility Comments		•	•			•	•	•		•



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
Influent Test Results - March 2017 (2 pages).pdf	Other	2017-04-28T12:29:21-04:00	N/A
2017-DMR Spreadsheet.pdf	Other	2017-04-28T12:25:01-04:00	N/A
Preliminary Monthly Climate Data - March 2017.pdf	Other	2017-04-28T12:29:41-04:00	N/A

PERMIT VIOLATIONS

_												
	Non Compliance	Event Begin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Comments
	ID [*]			1	1	· ·			' '			1

UNAUTHORISED DISCHARGES

Non Compliance	Event Regin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of	DEP Notified	Comments
Non compliance	Lvent begin bate	Lvent Lilu Date	Tillie Diacovereu	Oubstance	LVent Location	Volume	Duration	I receiving waters	impact on water	Cause Oi	DEI NOMMEG	Comments
l in				Discharged						Discharge		
יו ו				Dischargeu						Discharge		

OTHER PERMIT VIOLATIONS

Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	610-373-6667

SUBMITTED BY GREENPORT USER		Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2017	4	28
STOLTZFUSD	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: **688 SUGARTOWN RD, MALVERN PA, 19355-3302**

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

04

01

TO

YEAR

2017

FROM

OUTFALL NUMBER

04

30

Reorting Frequency: DMR Effective From: DMR Effective To:

Monthly 04/01/2017 04/30/2017

Permit Expires: MONITORING PERIOD МО DAY YEAR MO DAY

2017

Permit Application Due No Discharge?

02/29/2020 09/02/2019 No

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	N N	SAMPLE TYPE	SAMPLE FREQUENC
FARAIVILIER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMIFLE TIFE	SAMPLE PREQUENC
рН	Sample Measurement	***	***	***	8.0	***	8.0	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX	T	Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	7.8	7.8	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month
Flow	Sample Measurement	.013958	.418740	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***	Γ	Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	<3.0	<3.0	mg/L	Grab	1/month
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX	Ι Γ	Grab	1/month
Flow	Sample Measurement	.032	.051	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***	[Metered	Continuous
Facility Comments		•			•	•	•			•



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
2017-DMR Spreadsheet.pdf	Other	2017-05-28T00:20:31-04:00	April 2017-DMR Spreadsheet
Effluent Test Results - April 2017.pdf	Other	2017-05-28T00:21:44-04:00	Effluent Test Results - April 2017
Fecal Test Results - April 2017.pdf	Other	2017-05-28T00:22:24-04:00	Fecal Test Results - April 2017
Influent Test Results - April 2017 (2 pages).pdf	Other	2017-05-28T00:23:58-04:00	Influent Test Results - April 2017 (2 pages)
Preliminary Monthly Climate Data - April 2017.pdf	Other	2017-05-28T00:24:47-04:00	Preliminary Monthly Climate Data - April 2017

PERMIT VIOLATIONS

Non Compliance Event	t Begin Date Event End Date	Doromotor	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Commonto
Non Compliance Event	i begin bate Event End bate	Parameter	Lillitiype	Reported value	reminited value		Sampling Form ID			Comments
l 10.	<u> </u>		• • •		l					
1 10 1										

UNAUTHORISED DISCHARGES

Non Compliance	Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of	DEP Notified	Comments
ID				Discharged					' '	Discharge		

OTHER PERMIT VIOLATIONS

Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	610-373-6667

SUBMITTED BY GREENPORT USER	, , , , ,	Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2017	5	28
STOLTZFUSD	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

FROM

001
OUTFALL NUMBER

Reorting Frequency:

DMR Effective From:

DMR Effective To:

Monthly 05/01/2017 05/31/2017

 MONITORING PERIOD

 YEAR
 MO
 DAY
 YEAR
 MO
 DAY

 2017
 05
 01
 TO
 2017
 05
 31

Permit Application Due No Discharge?

Permit Expires:

02/29/2020 09/02/2019 No

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	ON	SAMPLE TYPE	SAMPLE FREQUENCY
TAKAWETEK		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMI LE TITE	SAMI LE I NEQUENCT
рН	Sample Measurement	***	***	***	7.41	***	7.41	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX] [Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	5.8	5.8	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX] [Grab	1/month
Flow	Sample Measurement	.031327	.971150	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***] [Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***] [Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	7.2	7.2	mg/L	Grab	1/month
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX]	Grab	1/month
Flow	Sample Measurement	.030	.038	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***] [Metered	Continuous
Facility Comments		•			•	•	•			•



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
May 2017-DMR Spreadsheet.pdf	Other	2017-06-27T21:58:16-04:00	May 2017-DMR Spreadsheet
Preliminary Monthly Climate Data - May 2017.pdf	Other	2017-06-27T21:59:03-04:00	Preliminary Monthly Climate Data - May 2017
Fecal Test Results - May 2017.pdf	Other	2017-06-27T21:57:46-04:00	Fecal Test Results - May 2017
Effluent Test Results - May 2017.pdf	Other	2017-06-27T21:56:18-04:00	Effluent Test Results - May 2017
Influent Test Results - May 2017 (2 pages).pdf	Other	2017-06-27T21:55:38-04:00	Influent Test Results - May 2017 (2 pages)

PERMIT VIOLATIONS

Non Compliance	Event Begin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Comments
ID.	1				1						

UNAUTHORISED DISCHARGES

Non Compliance	Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of	DEP Notified	Comments
ID				Discharged						Discharge		

OTHER PERMIT VIOLATIONS

Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	610-373-6667

SUBMITTED BY GREENPORT USER	*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under	Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2017	6	27
STOLTZFUSD	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

МО

06

DAY

01

YEAR

2017

FROM

001
OUTFALL NUMBER

MO

06

DAY

30

Reorting Frequency:
DMR Effective From:
DMR Effective To:

Monthly 06/01/2017 06/30/2017

Permit Expires:
Permit Application Due
No Discharge?

02/29/2020 09/02/2019 No

PARAMETERS REPORTED VALUES

PARAMETER		QUA	NTITY OR LOAD	DING	C	UANTITY OR C	ONCENTRATIO	ON	SAMPLE TYPE	SAMPLE FREQUENCY
FARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAWIFLE TIFE	SAWFLE FREQUENCY
рН	Sample Measurement	***	***	***	8.53	***	8.53	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX		Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	7	7	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX	1	Grab	1/month
Flow	Sample Measurement	.046300	1.435310	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***] [Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***] [Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	4.8	4.8	mg/L	Grab	1/month
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX] [Grab	1/month
Flow	Sample Measurement	.028	.035	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***]	Metered	Continuous
Facility Comments		•	•			•	•			-

MONITORING PERIOD

TO

YEAR

2017



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
Influent Test Results - June 2017 (Page 2).pdf	Other	2017-07-26T22:33:30-04:00	n/a
Preliminary Monthly Climate Data - June 2017.pdf	Other	2017-07-26T22:32:47-04:00	n/a
June 2017-DMR Spreadsheet.pdf	Other	2017-07-26T22:32:25-04:00	n/a
Influent Test Results - June 2017 (1 page).pdf	Other	2017-07-26T22:32:02-04:00	n/a
Fecal Test Results - June 2017.pdf	Other	2017-07-26T22:31:27-04:00	n/a
Effluent Test Results - June 2017.pdf	Other	2017-07-26T22:31:00-04:00	n/a

PERMIT VIOLATIONS

Non Compliance	Event Begin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Comments
l ID											

UNAUTHORISED DISCHARGES

Non Compliance Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Pocciving Waters Im	mpact On Water	Cause Of	DEP Notified	Comments
Non Compliance Event begin bate	Lveni Liiu Date	Tillie Discovered	Jubstance	L Veni Location	Volume	Duration	Receiving waters III	inpact On water	Cause Oi	DEF Notified	Comments
l ID I			Discharged				I I		Discharge		

OTHER PERMIT VIOLATIONS

Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
n/a	Matthew Boggs	T3293	610-373-6667

SUBMITTED BY GREENPORT USER		Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the	Danielle Stollzius	AREA CODE	NUMBER	2017	7	26
STOLTZFUSD	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

FROM

001
OUTFALL NUMBER

Reorting Frequency:
DMR Effective From:
DMR Effective To:
Permit Expires:

Monthly 07/01/2017 07/31/2017 02/29/2020

 MONITORING PERIOD

 YEAR
 MO
 DAY
 YEAR
 MO
 DAY

 2017
 07
 01
 TO
 2017
 07
 31

Permit Application Due 09/02/2019
No Discharge? No

PARAMETER		QUA	NTITY OR LOAD	DING	C	UANTITY OR C	ONCENTRATIO	ON	SAMPLE TYPE	SAMPLE FREQUENCY
FARAIVIETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAWIFLE TIFE	SAWFLE FREQUENCY
рН	Sample Measurement	***	***	***	8.38	***	8.38	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX	1 [Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	7.4	7.4	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX	1	Grab	1/month
Flow	Sample Measurement	.020269	.628340	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***] [Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***] [Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	3	3	mg/L	Grab	1/month
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX] [Grab	1/month
Flow	Sample Measurement	.025	.032	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***] [Metered	Continuous
Facility Comments		•	•			•				



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
Preliminary Monthly Climate Data - July 2017.pdf	Other	2017-08-27T23:55:12-04:00	N/A
July 2017-DMR Spreadsheet.pdf	Other	2017-08-27T23:54:45-04:00	N/A
Influent Test Results - July 2017 (Page 2).pdf	Other	2017-08-27T23:54:21-04:00	N/A
Influent Test Results - July 2017 (1 page).pdf	Other	2017-08-27T23:53:57-04:00	N/A
Effluent & Fecal Test Results - July 2017.pdf	Other	2017-08-27T23:53:31-04:00	N/A

PERMIT VIOLATIONS

Non Compliance Event	t Begin Date Event End Date	Doromotor	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Commonts
Non Compliance Event	i begin bate Event End bate	Parameter	Lillitiype	Reported value	reminited value		Sampling Form ID			Comments
l 10.	<u> </u>		• • •		l					
1 10 1										

UNAUTHORISED DISCHARGES

Non Compliance	Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of	DEP Notified	Comments
Non Compilance	Lvent begin bate	Event Life Date	Time Discovered		Lvent Location	Volume	Duration	Receiving Waters	impact on water	Oduse Oi	DEI NOTHIEG	Comments
ID	1			Discharged					1	Discharge		

OTHER PERMIT VIOLATIONS

Non Compliance ID Stage Code (Sampling Point) Reported Parameter Non Compliance Type	Comments
--	----------

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	610-373-6667

SUBMITTED BY GREENPORT USER		Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2017	8	27
STOLTZFUSD	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

80

01

2017

FROM

001
OUTFALL NUMBER

80

31

Reorting Frequency:
DMR Effective From:
DMR Effective To:

Monthly 08/01/2017 08/31/2017

MONITORING PERIOD

YEAR MO DAY YEAR MO DAY

TO

2017

Permit Application Due No Discharge?

Permit Expires:

02/29/2020 09/02/2019 No

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	ON	SAMPLE TYPE	SAMPLE FREQUENCY
TAKAWETEK		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	JAMI LL III L	S 22 2
рН	Sample Measurement	***	***	***	7.62	***	7.62	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX	1 [Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	12.8	12.8	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX] [Grab	1/month
Flow	Sample Measurement	.037853	1.173440	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***] [Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***] [Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	<3	<3	mg/L	Grab	1/month
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX] [Grab	1/month
Flow	Sample Measurement	.027	.040	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***	1 [Metered	Continuous
Facility Comments		•			•	•		•		•



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
August 2017-DMR Spreadsheet.pdf	Other	2017-09-27T22:26:37-04:00	N/A
Effluent Test Results - August 2017.pdf	Other	2017-09-27T22:27:03-04:00	N/A
Fecal Test Results - August 2017.pdf	Other	2017-09-27T22:27:31-04:00	N/A
Preliminary Monthly Climate Data - August 2017.pdf	Other	2017-09-27T22:28:31-04:00	N/A
Influent Test Results - August 2017 (2 pages).pdf	Other	2017-09-28T10:16:43-04:00	N/A

PERMIT VIOLATIONS

Non Compliance	Event Begin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Comments
ID.	1				1						

UNAUTHORISED DISCHARGES

Non Compliance	Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of	DEP Notified	Comments
ID				Discharged					' '	Discharge		

OTHER PERMIT VIOLATIONS

Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
Both of the influent samples were manually pulled from the force main before discharging into the influent bar screen and into the aerator lagoon. Each sample consisted of 5 grab samples gathered during 5 different flush cycles and combined to create a composite sample for proper testing. Reason for this occurrence was because the flex line on the automatic sampling pump located at the pump station overtime creating a break in the line. The part was located, ordered and the line was replaced.	33	T3293	6103736667

SUBMITTED BY GREENPORT USER		Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2017	9	28
STOLTZFUSD	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

МО

09

YEAR

2017

FROM

DAY

01

001
OUTFALL NUMBER

MO

09

DAY

30

Reorting Frequency:

DMR Effective From:

DMR Effective To:

No Discharge?

Monthly 09/01/2017 09/30/2017

Permit Expires: 02
Permit Application Due 09

02/29/2020 09/02/2019 No

PARAMETERS REPORTED VALUES

PARAMETER		QUA	NTITY OR LOAD	DING	C	UANTITY OR C	ONCENTRATIO	N	SAMPLE TYPE	SAMPLE FREQUENCY
FARAIVIETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAWIFLE TIFE	SAMPLE PREQUENCT
рН	Sample Measurement	***	***	***	7.36	***	7.36	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX] [Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	9.2	9.2	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX] [Grab	1/month
Flow	Sample Measurement	.023642	.709260	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***] [Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***] [Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	4.4	4.4	mg/L	Grab	1/month
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX] [Grab	1/month
Flow	Sample Measurement	.026	.029	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***] [Metered	Continuous
Facility Comments		•			•		•			•

MONITORING PERIOD

TO

YEAR

2017



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
September 2017-DMR Spreadsheet.pdf	Other	2017-10-27T14:21:09-04:00	N/A
Fecal Test Results - September 2017.pdf	Other	2017-10-27T14:20:17-04:00	N/A
Effluent Test Results - September 2017.pdf	Other	2017-10-27T14:19:27-04:00	N/A
Preliminary Monthly Climate Data - September 2017.pdf	Other	2017-10-27T14:20:53-04:00	N/A
Influent Test Results - September 2017 (2 pages).pdf	Other	2017-10-27T14:20:35-04:00	N/A

PERMIT VIOLATIONS

Non Compliance Event	t Begin Date Event End Date	Doromotor	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Commonts
Non Compliance Event	i begin bate Event End bate	Parameter	Lillitiype	Reported value	reminited value		Sampling Form ID			Comments
l 10.	<u> </u>		• • •		l					
1 10 1										

UNAUTHORISED DISCHARGES

Non Compliance	Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of	DEP Notified	Comments
ID				Discharged						Discharge		

OTHER PERMIT VIOLATIONS

Non Compliance ID Stage Code (Sampling Point) Reported Parameter Non Compliance Type	Comments
--	----------

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Bogs	T3293	610-373-6667

SUBMITTED BY GREENPORT USER	*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under	Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2017	10	27
STOLTZFUSD	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: **688 SUGARTOWN RD, MALVERN PA, 19355-3302**

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

OUTFALL NUMBER

Reorting Frequency: DMR Effective From: DMR Effective To:

No Discharge?

Monthly 10/01/2017 10/31/2017

Permit Expires: MONITORING PERIOD Permit Application Due DAY

31

МО DAY YEAR MO YEAR 10 FROM 2017 01 TO 2017 10 02/29/2020 09/02/2019 No

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	DN	SAMPLE TYPE	SAMPLE FREQUENC
TANAMETEN		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAIVII LE TITL	SAMI LE I NEQUENO
рН	Sample Measurement	***	***	***	8.99	***	8.99	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX		Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	5.8	5.8	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month
Flow	Sample Measurement	.007975	.247210	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***	1	Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	6.3	6.3	mg/L	Grab	1/month
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX	Ι Γ	Grab	1/month
Flow	Sample Measurement	.027	.032	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***	1	Metered	Continuous
Facility Comments		•	•		•		•			•



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
Influent Test Results - October 2017 (2 pages).pdf	Other	2017-11-28T12:45:23-05:00	N/A
October 2017-DMR Spreadsheet.pdf	Other	2017-11-28T12:45:40-05:00	N/A
Preliminary Monthly Climate Data - October 2017.pdf	Other	2017-11-28T12:46:26-05:00	N/A
Fecal Test Results - October 2017.pdf	Other	2017-11-28T12:45:02-05:00	N/A
Effluent Test Results - October 2017.pdf	Other	2017-11-28T12:44:45-05:00	N/A

PERMIT VIOLATIONS

Non Compliance	Event Begin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Comments
ID.	1				1						

UNAUTHORISED DISCHARGES

Non Compliance	Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of	DEP Notified	Comments
ID				Discharged						Discharge		

OTHER PERMIT VIOLATIONS

_					
Γ	Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	610-373-6667

SUBMITTED BY GREENPORT USER	, , , , , ,	Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2017	11	28
STOLTZFUSD	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

001
OUTFALL NUMBER

DAY

30

Reorting Frequency:
DMR Effective From:
DMR Effective To:
Permit Expires:

Monthly
11/01/2017
11/30/2017
02/29/2020
09/02/2019

 MONITORING PERIOD

 YEAR
 MO
 DAY
 YEAR
 MO

 FROM
 2017
 11
 01
 TO
 2017
 11

Permit Application Due No Discharge?

No

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	N N	SAMPLE TYPE	SAMPLE FREQUENC
FARAIVIETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLE TIPE	SAMPLE PREQUENC
рН	Sample Measurement	***	***	***	8.01	***	8.01	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX	T	Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	5.0	5.0	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month
Flow	Sample Measurement	.029155	.874645	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***		Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	3.0	3.0	mg/L	Grab	1/month
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX	[Grab	1/month
Flow	Sample Measurement	.028	.036	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Metered	Continuous
Facility Comments							•			•



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
November 2017 Preliminary Monthly Climate Data.pdf	Other	2017-12-28T09:57:46-05:00	N/A
Influent Test Results - November 2017 (2 pages).pdf	Other	2017-12-28T09:57:28-05:00	N/A
Effluent Test Results - November 2017.pdf	Other	2017-12-28T09:56:51-05:00	N/A
November 2017-DMR Spreadsheet.pdf	Other	2017-12-28T09:58:02-05:00	N/A
Fecal Test Results - November 2017.pdf	Other	2017-12-28T09:57:10-05:00	N/A

PERMIT VIOLATIONS

Non Compliance Event	t Begin Date Event End Date	Doromotor	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Commonts
Non Compliance Event	i begin bate Event End bate	Parameter	Lillitiype	Reported value	reminited value		Sampling Form ID			Comments
l 10.	<u> </u>		• • •		l					
1 10 1										

UNAUTHORISED DISCHARGES

Non Compliance	Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of	DEP Notified	Comments
ID				Discharged					' '	Discharge		

OTHER PERMIT VIOLATIONS

_					
Γ	Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	610-373-6667

SUBMITTED BY GREENPORT USER	, , , ,	Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2017	12	28
STOLTZFUSD	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

001
OUTFALL NUMBER

DAY

31

Reorting Frequency:
DMR Effective From:
DMR Effective To:

Monthly
12/01/2017
12/31/2017
02/29/2020

 MONITORING PERIOD

 YEAR
 MO
 DAY
 YEAR
 MO

 FROM
 2017
 12
 01
 TO
 2017
 12

Permit Application Due No Discharge?

Permit Expires:

09/02/2019 No

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	NO	SAMPLE TYPE	SAMPLE FREQUENCY
TANAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMI LE TITE	SAWI LE I REQUENCT
рН	Sample Measurement	***	***	***	7.79	***	7.79	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX] [Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	6.2	6.2	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX] [Grab	1/month
Flow	Sample Measurement	.007111	.220445	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***] [Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***] [Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	3	3	mg/L	Grab	1/month
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX]	Grab	1/month
Flow	Sample Measurement	.029	.041	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***] [Metered	Continuous
Facility Comments		•			•	•	•			-



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
Effluent Test Results - December 2017.pdf	Other	2018-01-26T14:14:26-05:00	N/A
December 2017 Preliminary Monthly Climate Data.pdf	Other	2018-01-26T14:13:12-05:00	N/A
Influent Test Results - December 2017 (2 pages).pdf	Other	2018-01-26T14:15:37-05:00	N/A
Fecal Test Results - December 2017.pdf	Other	2018-01-26T14:15:17-05:00	N/A
December 2017-DMR Spreadsheet.pdf	Other	2018-01-26T14:18:52-05:00	N/A

PERMIT VIOLATIONS

Non Compliance Event	t Begin Date Event End Date	Doromotor	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Commonts
Non Compliance Event	i begin bate Event End bate	Parameter	Lillitiype	Reported value	reminited value		Sampling Form ID			Comments
l 10.	<u> </u>		• • •		l					
1 10 1										

UNAUTHORISED DISCHARGES

Non Compliance	Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of	DEP Notified	Comments
ID				Discharged					' '	Discharge		

OTHER PERMIT VIOLATIONS

Non Compliance ID Stage Code (Sampling Point) Reported Parameter Non Compliance Type	Comments
--	----------

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
	Matthew Boggs	T3293	610-373-6667

SUBMITTED BY GREENPORT USER	*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a	Danielle Stoltzfus	TELEPHO	NE	DATE		
	system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2018	1	26
STOLTZFUSD	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

FROM

001
OUTFALL NUMBER

Reorting Frequency:
DMR Effective From:
DMR Effective To:

Monthly 01/01/2018 01/31/2018

MONITORING PERIOD

Permit Expires:

Permit Application

DAY

VEAR MO DAY

No Discharge?

31

 YEAR
 MO
 DAY
 YEAR
 MO

 2018
 01
 01
 TO
 2018
 01

Permit Application Due No Discharge?

02/29/2020 09/02/2019 Yes

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	N	SAMPLE TYPE	SAMPLE FREQUENCY
TAKAMETEK		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAIVII LL TTT L	SAMI LE I NEQUENO
рН	Sample Measurement	***	***	***	***	***	***	S.U.		
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX		Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month
Flow	Sample Measurement	***	***	MGD	***	***	***	***		
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	***	***	CFU/100 ml		
	Permit Measurement	***	***		***	200 Geo Mean	***		Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX		Grab	1/month
Flow	Sample Measurement	.029	.039	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Metered	Continuous
Facility Comments		•	•		•		•			•



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
Influent Test Results - January 2018 (1 page).pdf	Other	2018-02-28T14:50:49-05:00	N/A
Preliminary Monthly Climate Data - January 2018.pdf	Other	2018-02-28T14:51:43-05:00	N/A
January 2018 - DMR Spreadsheet.pdf	Other	2018-02-28T14:51:25-05:00	N/A
Influent Test Results - January 2018 (1-25-18 event).pdf	Other	2018-02-28T14:51:06-05:00	N/A

PERMIT VIOLATIONS

N	on Compliance	Event Begin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Corrective Action	Comments
	ID					1					

UNAUTHORISED DISCHARGES

Non Compliance Event Begin Date Event End Date Time Discovered Substance Event Location Volume	Duration Receiving Waters Impact On Water Cause Of DEP Notified Comments
Non Compliance Event Begin Date Event End Date Time Discovered Substance Event Location Volume	Duration Receiving Waters Impact On Water Cause Of DEP Notified Comments
Displayment	Discharge
ID	Discharge

OTHER PERMIT VIOLATIONS

Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	610-373-6667

SUBMITTED BY GREENPORT USER	*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a	Danielle Stoltzfus	TELEPHO	NE	DATE		
	system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2018	2	28
STOLTZFUSD	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

FROM

001
OUTFALL NUMBER

Reorting Frequency:
DMR Effective From:
DMR Effective To:
Permit Expires:

No

Monthly
02/01/2018
02/28/2018
02/29/2020
09/02/2019

MONITORING PERIOD Permit Application Due МО DAY YEAR MO DAY YEAR No Discharge? 02 2018 01 TO 2018 02 28

PARAMETER		QUA	NTITY OR LOAD	DING	C	UANTITY OR C	ONCENTRATIO	DN .	SAMPLE TYPE	SAMPLE FREQUENCY
FARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMIFLE TIFE	SAMPLE PREQUENCY
рН	Sample Measurement	***	***	***	6.92	***	6.92	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX		Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	5.2	5.2	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX] [Grab	1/month
Flow	Sample Measurement	.009403	.291480	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***] [Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	12.7	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***] [Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	5.6	5.6	mg/L	Grab	1/month
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX		Grab	1/month
Flow	Sample Measurement	.034	.044	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Metered	Continuous
Facility Comments		•	•			•		•		•



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
Influent Test Results - February 2018 (2 pages).pdf	Other	2018-03-28T22:54:55-04:00	Influent Test Results - February 2018 (2 pages)
February 2018 - DMR Spreadsheet.pdf	Other	2018-03-28T22:52:09-04:00	February 2018 - DMR Spreadsheet
February 2018 - DMR Spreadsheet.pdf	Other	2018-03-28T23:05:48-04:00	February 2018 - DMR Spreadsheet
Preliminary Monthly Climate Data - February 2018.pdf	Other	2018-03-28T23:04:16-04:00	Preliminary Monthly Climate Data - February 2018
Effluent Test Results - February 2018.pdf	Other	2018-03-28T23:01:06-04:00	Effluent Test Results - February 2018

PERMIT VIOLATIONS

- [Non Compliance	Event Regin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Commonts
	Non Compliance	Lveiii begiii bate	LVeni Liiu Date	Farainetei	Lilling Type	Neported value	reminited value	Luau uiilis	Jamping Font ib	Cause Of NC	Corrective Action	Comments
	ID.	_				1	l .		' '			
			l				l					

UNAUTHORISED DISCHARGES

Non Compliance	Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of	DEP Notified	Comments
ID.				Discharged				"	·	Discharge		

OTHER PERMIT VIOLATIONS

Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments
55262			Late DMR Submission	

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	610-373-6667

SUBMITTED BY GREENPORT USER		Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2018	3	28
STOLTZFUSD	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

001
OUTFALL NUMBER

Reorting Frequency:
DMR Effective From:
DMR Effective To:
Permit Expires:

Monthly 03/01/2018 03/31/2018

MONITORING PERIOD

R MO DAY YEAR M

01

YEAR MO FROM **2018 03** YEAR MO DAY
TO 2018 03 31

Permit Application Due No Discharge?

02/29/2020 09/02/2019 No

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATION	ON	SAMPLE TYPE	SAMPLE FREQUENCY
TAKAWETEK		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMI LE TITE	O, WIII EE I REGGERGT
рН	Sample Measurement	***	***	***	7.34	***	7.34	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX		Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	6.2	6.2	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month
Flow	Sample Measurement	.015706	.486901	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***		Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	4.9	4.9	mg/L	Grab	1/month
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX] [Grab	1/month
Flow	Sample Measurement	.038	.063	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***	<u> </u>	Metered	Continuous
Facility Comments					•			•		-



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
Effluent Test Results - March 2018.pdf	Other	2018-04-27T15:14:15-04:00	N/A
March 2018 - DMR Spreadsheet.pdf	Other	2018-04-27T15:15:21-04:00	N/A
Fecal Test Results - March 2018.pdf	Other	2018-04-27T15:14:36-04:00	N/A
Influent Test Results - March 2018 (2 pages).pdf	Other	2018-04-27T15:15:02-04:00	N/A
Preliminary Monthly Climate Data - March 2018.pdf	Other	2018-04-27T15:15:39-04:00	N/A

PERMIT VIOLATIONS

Non Compliance Event	t Begin Date Event End Date	Doromotor	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Commonts
Non Compliance Event	i begin bate Event End bate	Parameter	Lillitiype	Reported value	reminited value		Sampling Form ID			Comments
l 10.	<u> </u>		• • •		l					
1 10 1										

UNAUTHORISED DISCHARGES

Non Compliance	Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of	DEP Notified	Comments
ID				Discharged					' '	Discharge		

OTHER PERMIT VIOLATIONS

_					
Γ	Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	610-373-6667

SUBMITTED BY GREENPORT USER	*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under	Danielle Stoltzfus	TELEPHO	NE	DATE		
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2018	4	27
STOLTZFUSD	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

МО

04

DAY

01

YEAR

2018

FROM

OUTFALL NUMBER

MO

04

DAY

30

DMR Effective From:
DMR Effective To:
Permit Expires:
Permit Application Due

No

Reorting Frequency:

No Discharge?

Monthly
04/01/2018
04/30/2018
02/29/2020
09/02/2019

PARAMETERS REPORTED VALUES

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	ON	SAMPLE TYPE	SAMPLE FREQUENC
FARAIVIETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLE TIPE	SAMPLE PREQUENC
рН	Sample Measurement	***	***	***	6.75	***	6.75	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX	Ī Γ	Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	14.0	14.0	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX	[Grab	1/month
Flow	Sample Measurement	.019007	.570220	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***	Ī [Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***	Ī [Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	4.7	4.7	mg/L	Grab	1/month
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX	Ī [Grab	1/month
Flow	Sample Measurement	.036	.055	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***	1 [Metered	Continuous
Facility Comments		•	· · · · · ·		-	•	•			•

MONITORING PERIOD

TO

YEAR

2018



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
Preliminary Monthly Climate Data - April 2018.pdf	Other	2018-05-25T14:03:57-04:00	N/A
Fecal Test Results - April 2018.pdf	Other	2018-05-25T14:04:42-04:00	N/A
Influent Test Results - April 2018 (2 pages).pdf	Other	2018-05-25T14:04:20-04:00	N/A
April 2018 - DMR Spreadsheet.pdf	Other	2018-05-25T14:05:35-04:00	N/A
Effluent Test Results - April 2018.pdf	Other	2018-05-25T14:05:13-04:00	N/A

PERMIT VIOLATIONS

Non Compliance Event	t Begin Date Event End Date	Doromotor	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Commonts
Non Compliance Event	i begin bate Event End bate	Parameter	Lillitiype	Reported value	reminited value		Sampling Form ID			Comments
l 10.	<u> </u>		• • •		l					
1 10 1										

UNAUTHORISED DISCHARGES

Non Compliance Event Begin Date	Event End Date	Time Discovered	Substance Discharged	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of Discharge	DEP Notified	Comments

OTHER PERMIT VIOLATIONS

Non Compliance ID Stage Code (Sampling Point) Reported Parameter Non Compliance Type	Comments
--	----------

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	610-373-6667

SUBMITTED BY GREENPORT USER	*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under	Danielle Stoltzfus	TELEPHO	NE	DATE		
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2018	5	25
STOLTZFUSD	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: **688 SUGARTOWN RD, MALVERN PA, 19355-3302**

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

1596405 PERMIT NUMBER

01

TO

YEAR

2018

FROM

OUTFALL NUMBER

05

31

Reorting Frequency: DMR Effective From: DMR Effective To: Permit Expires:

Monthly 05/01/2018 05/31/2018 02/29/2020

MONITORING PERIOD МО DAY YEAR MO DAY No Discharge? 05

2018

Permit Application Due 09/02/2019 No

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	ON	SAMPLE TYPE	SAMPLE FREQUENC
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLE TIPE	SAMPLE PREQUENC
рН	Sample Measurement	***	***	***	7.13	***	7.13	S.U.	Grab	1/month
	Permit Measurement	***	***		6.0 Inst Min	***	9.0 IMAX	T	Grab	1/month
Total Suspended Solids	Sample Measurement	***	***	***	***	7.6	7.6	mg/L	Grab	1/month
	Permit Measurement	***	***		***	30 Avg Mo	60 IMAX		Grab	1/month
Flow	Sample Measurement	1.417240	1.417240	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Metered	Continuous
Fecal Coliform	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	Grab	1/month
	Permit Measurement	***	***		***	200 Geo Mean	***	[Grab	1/month
Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample Measurement	***	***	***	***	4.5	4.5	mg/L	Grab	1/month
	Permit Measurement	***	***		***	25 Avg Mo	50 IMAX	Ι Γ	Grab	1/month
Flow	Sample Measurement	1.142	1.142	MGD	***	***	***	***	Metered	Continuous
	Permit Measurement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***	[Metered	Continuous
Facility Comments								·		•



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
Effluent Test Results - May 2018.pdf	Other	2018-06-29T16:18:20-04:00	N/A
Fecal Test Results - May 2018.pdf	Other	2018-06-29T16:18:44-04:00	N/A
Influent Test Results - April 2018 (5-25-18 result).pdf	Other	2018-06-29T16:19:10-04:00	N/A
Preliminary Monthly Climate Data - May 2018.pdf	Other	2018-06-29T16:23:28-04:00	N/A
May 2018 - DMR Spreadsheet.pdf	Other	2018-06-29T16:19:57-04:00	N/A
Influent Test Results - May 2018 (5-11-18 Result).pdf	Other	2018-06-29T16:19:35-04:00	N/A

PERMIT VIOLATIONS

Non Compliance ID	Event Begin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point ID	Cause Of NC	Corrective Action	Comments
59308	05/01/2018	05/31/2018	Flow	Average Monthly	1.142	.045	MGD	Influent (001)			

UNAUTHORISED DISCHARGES

Non Compliance	Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of	DEP Notified	Comments
l ID	_			Discharged						Discharge		

OTHER PERMIT VIOLATIONS

Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments
59309			Late DMR Submission	

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	610-373-6667

SUBMITTED BY GREENPORT USER		Daniella Staltzfua	TELEPHO	NE	DATE		
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		AREA CODE	NUMBER	2018	6	29
STOLTZFUSD	the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

1596405

06

FROM **2018**

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

PERI	MIT NUN	MBER	OUTFALL NUMBER										
	MONITORING PERIOD												
YEAR	МО	DAY		YEAR	МО	DAY							

TO

01

06

30

2018

Reporting Frequency:	Monthly
DMR Effective From:	06/01/2018
DMR Effective To:	06/30/2018
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	П

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIC	N	SAMPLING FREQUENCY	SAMPLING TYPE
FARAWLILK		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMPLING TIPL
pH (00400)	Sample Measurement	***	***	***	7.12	***	7.12	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	<5.0	<5.0	mg/L	1/month	Composite
	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	.044139	1.324180	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1.0	***	CFU/100 ml	1/month	Grab
	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	<3.0	<3.0	mg/L	1/month	Composite
	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Comments		•			•			•		



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

1596405

PERMIT NUMBER

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Influent

			J										
	MONITORING PERIOD												
YEAR	МО	DAY		YEAR	МО	DAY							
2018	06	01	TO	2019	06	30							

OUTFALL NUMBER

Reporting Frequency:	Monthly
DMR Effective From:	06/01/2018
DMR Effective To:	06/30/2018
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	П

PARAMETER		QUANTITY OR LOADING			Q	UANTITY OR C	ONCENTRATIC	N	SAMPLING FREQUENCY	SAMPLING TYPE	
TANGWETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	O/WII EINOT REQUERT		
Flow (50050)	Sample Measurement	.036	.043	MGD	***	***	***	***	Continuous	Metered	
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered	
Facility Comments											



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comment
Preliminary Monthly Climate Data - June 2018.pdf	Other	2018-07-27T11:51:46-04:00	N/A
June 2018 - DMR Spreadsheet.pdf	Other	2018-07-27T11:51:22-04:00	N/A
Fecal Test Results - June 2018.pdf	Other	2018-07-27T11:50:28-04:00	N/A
Effluent Test Results - June 2018.pdf	Other	2018-07-27T11:49:30-04:00	N/A
Influent Test Results - June 2018 (2 pages).pdf	Other	2018-07-27T11:50:52-04:00	N/A

PERMIT VIOLATIONS

No	Compliance	Event Begin Date	Event End Date	Parameter	Limit Type	Reported Value	Permitted Value	Load Units	Sampling Point	Cause Of NC	Corrective Action	Commonts
INUI	i Compnance	Lveni begin bate	Lveiit Liiu Date	raiailletei	Lilling Type	I reported value	reminited value	Luau Ullis	Janiping Font	Cause Of NC		Comments
1	ID.	_				1	l .					
1	10						l .					

UNAUTHORIZED DISCHARGES

Non Compliance	Event Begin Date	Event End Date	Time Discovered	Substance	Event Location	Volume	Duration	Receiving Waters	Impact On Water	Cause Of	DEP Notified	Comments
ID.				Discharged				"	·	Discharge		

OTHER PERMIT VIOLATIONS

Non Compliance ID	Stage Code (Sampling Point)	Reported Parameter	Non Compliance Type	Comments
68439	Final Effluent (001)	Total Suspended Solids	Sample type not in accordance with permit	
68440	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Sample type not in accordance with permit	

COMMENTS DETAILS

Comment	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	610-373-6667

SUBMITTED BY GREENPORT USER	1	Danielle Stoltzfus	TELEPHO	NE	DATE		
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		484	-334-3032	2018	7	27
stoltzfusd	the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489
STAGE:	Final Effluent

				_							
		159640	5		001			Reporting Frequency:	Monthly		
	PERI	MIT NU	MBER	1	OUTF	ALL NU	MBER	DMR Effective From:	07/01/2018		
				J				DMR Effective To:	07/31/2018		
			MONITO	ORING F	PERIOD			Permit Expires: Permit Application Due:	02/29/2020		
									09/02/2019		
	YEAR	МО	DAY		YEAR	МО	DAY	No Discharge:			
FROM	2018	07	01	то	2018	07	31		Ц		

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	N	SAMPLING FREQUENCY 1/month 1/month 1/month 1/month Continuous Continuous 1/month 1/month	SAMPLING TYPE	
FARAINETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMI LING THE	
pH (00400)	Sample Measurement	***	***	***	7.48	***	7.48	S.U.	1/month	Grab	
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX]	1/month	Grab	
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	<5.0	<5.0	mg/L	1/month	Composite	
	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX]	1/month	Grab	
Flow (50050)	Sample Measurement	.019982	.619449	MGD	***	***	***	***	Continuous	Metered	
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered	
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	1/month	Grab	
	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab	
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	3.5	3.5	mg/L	1/month	Composite	
	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX	1	1/month	Grab	
Facility Comments	İ	•			•						

3800-FM-BPNPSM0462 3/2012



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489
STAGE:	Influent

	159640	5			001	
PERI	MIT NUI	MBER		OUTF	ALL NU	MBER
		MONITO	RING F	PERIOD		
YEAR	МО	DAY		YEAR	МО	DAY

01

FROM **2018**

07

31

Reporting Frequency:	Monthly
DMR Effective From:	07/01/2018
DMR Effective To:	07/31/2018
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETERS REPORTED VALUES

PARAMETER		QUANTITY OR LOADING		QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE		
TATOWIETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	Orivin Elino I REGOLINO I	CANNI ENVO TTI E	
Flow (50050)	Sample Measurement	.031	.045	MGD	***	***	***	***	Continuous	Metered	
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered	
Facility Comments											

TO

2018

07

3800-FM-BPNPSM0462 3/2012



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
Fecal Test Results - July 2018.pdf	Other	2018-08-28T13:15:10-04:00	N/A
Effluent Test Results - July 2018.pdf	Other	2018-08-28T13:14:51-04:00	N/A
Influent Test Results - July 2018 (2 pages).pdf	Other	2018-08-28T13:15:31-04:00	N/A
Preliminary Monthly Climate Data - July 2018.pdf	Other	2018-08-28T13:16:13-04:00	N/A
July 2018 - DMR Spreadsheet.pdf	Other	2018-08-28T13:15:53-04:00	N/A

PERMIT VIOLATIONS

Non-Compliance I	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments

UNAUTHORIZED DISCHARGES

_													
	Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified	Comments
	Non-compliance ib	Lvent otalt bate	Event Life Date	Date and Time Discovered		LVent Location	Volume (gai)	Duration (ma)	Necelving Waters	impact on waters	Oadse of Discharge	Date and Time DET Notified	Comments
					Discharged							l Orally I	
					Dischargeu							l Clarity I	
					•							1 1	

OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Comments
70544	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	
70545	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	(610)-373-6667

SUBMITTED BY GREENPORT USER	*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a	Danielle Stoltzfus	TELEPHO	NE		DATE	
	system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the	1	(484)	334-3032	2018	8	28
stoltzfusd	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

1596405

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

	PERI	MIT NU	MBER		OUTF	ALL NU	IMBER
			MONITO	PERIOD			
14	YEAR	МО	DAY		YEAR	МО	DAY
ROM	2018	08	01	то	2018	08	31
	-		_				•

Reporting Frequency:	Monthly
OMR Effective From:	08/01/2018
OMR Effective To:	08/31/2018
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING ITPE
pH (00400)	Sample Measurement	***	***	***	7.01	***	7.01	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	5.6	5.6	mg/L	1/month	Composite
(Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	.043181	1.338602	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***	1 3	Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	16.4	***	CFU/100 ml	1/month	Grab
	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	3.9	3.9	mg/L	1/month	Composite
4	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Comments		•							*	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489
STAGE:	Influent

	159640	ວ		001					
PERN	/IT NUI	MBER		OUTFALL NUMBER					
		MONITO	ORING	PERIOD					
EAR	МО	DAY		YEAR	МО	DAY			
018	08	01	то	2018	08	31			
	EAR	EAR MO	EAR MO DAY	MONITORING EAR MO DAY	MONITORING PERIOD EAR MO DAY YEAR	MONITORING PERIOD EAR MO DAY YEAR MO			

Reporting Frequency:	Monthly
DMR Effective From:	08/01/2018
DMR Effective To:	08/31/2018
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	JAMIFLING PREQUENCY	SAMPLING TIPE
Flow (50050)	Sample Measurement	.036	1.106	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Comments										



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
eDMR Confirmation Report and details - August 2018.pdf	Other		Confirmation Report stating that September's information was submitted. The data entered under this report was to be submitted for August, not September.
Preliminary Monthly Climate Data - August 2018.pdf	Other	2018-10-01T14:32:39-04:00	N/A
Influent Test Results - August 2018 (2 pages).pdf	Other	2018-10-01T14:32:18-04:00	N/A
Fecal Test Results - August 2018.pdf	Other	2018-10-01T14:31:55-04:00	N/A
Effluent Test Results - August 2018.pdf	Other	2018-10-01T14:30:39-04:00	N/A
August 2018 - DMR Spreadsheet.pdf	Other	2018-10-01T14:30:17-04:00	N/A

PERMIT VIOLATIONS

	I LINIIII VIOLATIONE											
(*)	Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments

UNAUTHORIZED DISCHARGES

- 3													
J	Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified Orally	Comments

OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments
72415	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	Composite	Grab	
72416	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Composite	Grab	-
72417	Late DMR Submission					-14

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
August's data was entered into the September report and submitted. I called the Harrisburg location and spoke with a woman named Twilight and she stated someone would touch base with me. I have not received any contact. I attempted email twice. I recently received a response via email to contact DEP's SouthEast Regional office. I called and left another voicemail. I could not locate a representative in regards to this error to avoid any enforcement action to Willistown Township.		T3293	(610)-373-6667

SUBMITTED BY GREENPORT USER		Daniella Staltzfus	TELEPHO	ONE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).		(484)	334-3032	2018	10	1
stoltzfusd		SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

	159640)5		001				
PERM	ИIT NU	MBER		OUTFALL NUMBER				
		MONITO	ORING	PERIOD				
YEAR	МО	DAY		YEAR	МО	DAY		
2018	09	01	то	2018	09	30		
	PERM	PERMIT NU	YEAR MO DAY	PERMIT NUMBER MONITORING YEAR MO DAY	PERMIT NUMBER OUTFA MONITORING PERIOD YEAR MO DAY YEAR	PERMIT NUMBER OUTFALL NU MONITORING PERIOD YEAR MO DAY YEAR MO		

Reporting Frequency:	Monthly	
MR Effective From:	09/01/2018	
OMR Effective To:	09/30/2018	
Permit Expires:	02/29/2020	
Permit Application Due:	09/02/2019	
lo Discharge:		

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING ITPE
pH (00400)	Sample Measurement	***	***	***	6.75	***	6.75	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	<5.0	<5.0	mg/L	1/month	Composite
(Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	.047951	1.438519	MGD	***	***	***	***	Continuous	Metered
11011 (00000)	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	1/month	Grab
4	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	6.7	6.7	mg/L	1/month	Composite
isonaccous Brookermour Cxygon Bernand (C5C50) (CCCC2)	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Comments		1						-	*	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY	-
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302	
FACILITY:	PENNS PRESERVE STP	
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489	
STAGE:	Influent	

	4	159640 MIT NU			OUTF	001 ALL NU	IMBER				
		MONITORING PERIOD									
	YEAR	МО	DAY		YEAR	МО	DAY				
FROM	2018	2018 09 01		то	2018	09	30				

Reporting Frequency:	Monthly
DMR Effective From:	09/01/2018
DMR Effective To:	09/30/2018
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
PARAIVIETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMIFLING TIFE
Flow (50050)	Sample Measurement	.041	.053	MGD	***	***	***	***	Continuous	Metered
1 low (30030)	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Comments										



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
Fecal Test Results - September 2018.pdf	Other	2018-10-26T14:08:26-04:00	N/A
Influent Test Results - September 2018 (2 pages).pdf	Other	2018-10-26T14:08:47-04:00	N/A
Preliminary Monthly Climate Data - September 2018.pdf	Other	2018-10-26T14:09:06-04:00	N/A
September 2018 - DMR Spreadsheet.pdf	Other	2018-10-26T14:09:26-04:00	N/A
Effluent Test Results - September 2018.pdf	Other	2018-10-26T14:08:07-04:00	N/A

PERMIT VIOLATIONS

- 10	Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments
- 1												

UNAUTHORIZED DISCHARGES

Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified Orally	Comments
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OTHER PERMIT VIOLATIONS

Non-Compliance	D Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments
75408	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	Composite	Grab	
75409	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Composite	Grab	1

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
August's data was entered into the September report and submitted in error. Please see comments in comment details section of August report. September information was revised on 9/26/2018 and submitted.	Matthew Boggs	T3293	(610)-373-6667

SUBMITTED BY GREENPORT USER	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a	Daniella Staltzfus	TELEPHO	ONE	DATE		
-	system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		(484)	334-3032	2018	10	26
stoltzfusd	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

		159640	5			001					
	PERM	MIT NU	MBER		OUTFALL NUMBER						
	MONITORING PERIOD										
	YEAR	МО	DAY	J. C.	YEAR	МО	DAY				
FROM	-	10	01	то	2018	10	31				
							1				

Reporting Frequency:	Monthly
OMR Effective From:	10/01/2018
OMR Effective To:	10/31/2018
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
lo Discharge:	

PARAMETER		QUA	NTITY OR LOAD	ING	Q	UANTITY OR C	ONCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE	
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE VALUE UNITS		SAMPLING FREQUENCY	SAMIFLING TIFE	
pH (00400)	Sample Measurement	***	***	***	7.24	***	7.24	S.U.	1/month	Grab	
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab	
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	5.4	5.4	mg/L	1/month	Composite	
(Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab	
Flow (50050)	Sample Measurement	.054074	1.676280	MGD	***	***	***	***	Continuous	Metered	
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered	
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	1/month	Grab	
	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab	
arbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	6.5	6.5	mg/L	1/month	Composite	
	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab	
Facility Comments			-				-	-	*		



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489
STAGE:	Influent

		159640 MIT NU			OUTF	001 ALL NU	MBER
			PERIOD				
	YEAR	МО	DAY		YEAR	МО	DAY
FROM	2018	10	01	то	2018	10	31

Reporting Frequency:	Monthly
DMR Effective From:	10/01/2018
DMR Effective To:	10/31/2018
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMPLING TIPE
Flow (50050)	Sample Measurement	.039	.048	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Comments			A							



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
Influent Test Results - October 2018 (2 pages).pdf	Other	2018-11-27T15:28:49-05:00	N/A
October 2018 - DMR Spreadsheet.pdf	Other	2018-11-27T15:29:05-05:00	N/A
Effluent Test Results - October 2018.pdf	Other	2018-11-27T15:28:15-05:00	N/A
Fecal Test Results - October 2018.pdf	Other	2018-11-27T15:28:31-05:00	N/A
Preliminary Monthly Climate Data - October 2018.pdf	Other	2018-11-27T15:29:30-05:00	N/A

PERMIT VIOLATIONS

 Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments
	7.7	^									
UNAUTHORIZED DISC	CHARGES				-						

ANTO THORESEE DISCHARGE

J	Non-compliance ib	Event otalt bate	Event End Date	Date and Time Discovered	Discharged	Event Eccation	Volume (gai)	Duration (iii s)	Receiving Waters	impact on waters	Gause of Discharge	Orally	Comments	
С		-				-		-	^					

OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments
77185	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Composite	Grab	
77186	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	Composite	Grab	1

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number	
N/A	Matthew Boggs	T3293	(610)-373-6667	

SUBMITTED BY GREENPORT USER		Danielle Stoltzfus	TELEPHO	NE	DATE		
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		(484)	334-3032	2018	11	27
stoltzfusd	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY	3
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302	3
FACILITY:	PENNS PRESERVE STP	
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489	
CTACE.	Final Effluent	-

		159640	5			001				
	PERM	MIT NUI	MBER		OUTF	ALL NU	MBER			
			MONITO	ORING	PERIOD					
10	YEAR	МО	DAY		YEAR	МО	DAY			
FROM	2018	11	01	то	2018	11	30			

Reporting Frequency:	Monthly	
DMR Effective From:	11/01/2018	
DMR Effective To:	11/30/2018	
Permit Expires:	02/29/2020	
Permit Application Due:	09/02/2019	
No Discharge:		

PARAMETER		QUA	NTITY OR LOAD	ING	QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE	
PARAWETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMI LING ITI L	
pH (00400)	Sample Measurement	***	***	***	7.61	***	7.61	S.U.	1/month	Grab	
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab	
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	<5.0	<5.0	mg/L	1/month	Composite	
(Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab	
Flow (50050)	Sample Measurement	.035798	1.073930	MGD	***	***	***	***	Continuous	Metered	
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered	
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	1/month	Grab	
4	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab	
arbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	3.3	3.3	mg/L	1/month	Composite	
arbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab	
Facility Comments			-					-	*		



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Influent

	159640	5			001	
PERM	/IT NUI	MBER		OUTF	ALL NU	MBER
		MONITO	ORING	PERIOD		
YEAR	МО	DAY		YEAR	МО	DAY
2018	11	01	то	2018	11	30
	PERM	PERMIT NU	YEAR MO DAY	PERMIT NUMBER MONITORING YEAR MO DAY	PERMIT NUMBER OUTFA MONITORING PERIOD YEAR MO DAY YEAR	PERMIT NUMBER OUTFALL NU MONITORING PERIOD YEAR MO DAY YEAR MO

Reporting Frequency:	Monthly	
DMR Effective From:	11/01/2018	
DMR Effective To:	11/30/2018	
Permit Expires:	02/29/2020	
Permit Application Due:	09/02/2019	
No Discharge:		

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
FARAIVIETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMIFLING TIFE
Flow (50050)	Sample Measurement	.047	1.422	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Comments										



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
November 2018 - DMR Spreadsheet.pdf	Other	2018-12-28T13:07:29-05:00	N/A
Effluent Test Results - November 2018.pdf	Other	2018-12-28T13:08:12-05:00	N/A
Fecal Test Results - November 2018.pdf	Other	2018-12-28T13:08:31-05:00	N/A
Preliminary Monthly Climate Data - November 2018.pdf	Other	2018-12-28T13:08:57-05:00	N/A
Influent Test Results - November 2018 (2 pages).pdf	Other	2018-12-28T13:07:51-05:00	N/A

PERMIT VIOLATIONS

Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments
78844	11/01/2018	11/30/2018	Flow	Average Monthly	.047	.045	MGD	Influent (001)			

UNAUTHORIZED DISCHARGES

102									V	J			
1	Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified Orally	Comments

OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type Sampling Point		Parameter	Reported Value	Permit Limit	Comments
78845	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Composite	Grab	-
78846	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	Composite	Grab	

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
	Matthew Boggs	T3293	(610)-373-6667

SUBMITTED BY GREENPORT USER		Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		(484)	334-3032	2018	12	28
stoltzfusd	the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

		159640	5			001						
	PERM	MIT NU	MBER		OUTF	ALL NU	IMBER					
	MONITORING PERIOD											
	YEAR	МО	DAY	J. C.	YEAR	МО	DAY					
FROM	2018	12	01	то	2018	12	31					
FROM	2018	12	01	ТО	2018	12	31					

Reporting Frequency:	Monthly
OMR Effective From:	12/01/2018
OMR Effective To:	12/31/2018
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QUA	NTITY OR LOAD	ING	Q	UANTITY OR C	ONCENTRATIO	ON	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING ITPE
pH (00400)	Sample Measurement	***	***	***	7.11	***	7.11	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	<5	<5	mg/L	1/month	24-Hr Composite
(Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	.015090	.467780	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	1/month	Grab
	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
arbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	<3	<3	mg/L	1/month	24-Hr Composite
	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Comments			-				4	+	*	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489
STAGE:	Influent

	4	159640 MIT NU			OUTF	001 ALL NU	MBER
H			MONITO	ORING	PERIOD		
	YEAR	МО	DAY		YEAR	МО	DAY
FROM	2018 12		01	то	2018	12	31

Reporting Frequency:	Monthly
OMR Effective From:	12/01/2018
OMR Effective To:	12/31/2018
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QU <i>F</i>	ANTITY OR LOAD	DING	Q	UANTITY OR CO	ONCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE
FARAIVIETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	
Flow (50050)	Sample Measurement	.049	.067	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Comments										



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
Preliminary Monthly Climate Data - December 2018.pdf	Other	2019-01-24T15:32:41-05:00	N/A
Fecal Test Results - December 2018.pdf	Other	2019-01-24T15:31:58-05:00	N/A
December 2018 - DMR Spreadsheet.pdf	Other	2019-01-24T15:31:17-05:00	N/A
Influent Test Results - December 2018 (2 pages).pdf	Other	2019-01-24T15:32:18-05:00	N/A
Effluent Test Results - December 2018.pdf	Other	2019-01-24T15:31:40-05:00	N/A

PERMIT VIOLATIONS

ा	Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments
-01	80335	12/01/2018	12/31/2018	Flow	Average Monthly	.049	.045	MGD	Influent (001)			

UNAUTHORIZED DISCHARGES

102									V	J			
1	Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified Orally	Comments

OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments
80333	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	24-Hr Composite	Grab	-
80334	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	24-Hr Composite	Grab	

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	(610)-373-6667

SUBMITTED BY GREENPORT USER	, , , , , , , , , , , , , , , , , , , ,	Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the	1	(484)	334-3032	2019	1	24
stoltzfusd	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY	
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302	
FACILITY:	PENNS PRESERVE STP	
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489	
STAGE:	Final Effluent	7

	159640	5			001			
PERM	ЛІТ NU	MBER		OUTFALL NUMBER				
		MONITO	RING	PERIOD		DAY 31		
YEAR	МО	DAY		YEAR	МО	DAY		
2019	01	01	то	2019	01	31		
	PERM	PERMIT NU	PERMIT NUMBER MONITO YEAR MO DAY	PERMIT NUMBER MONITORING YEAR MO DAY	PERMIT NUMBER OUTFA MONITORING PERIOD YEAR MO DAY YEAR	PERMIT NUMBER OUTFALL NU MONITORING PERIOD YEAR MO DAY YEAR MO		

Reporting Frequency:	Monthly	
OMR Effective From:	01/01/2019	
OMR Effective To:	01/31/2019	
Permit Expires:	02/29/2020	
Permit Application Due:	09/02/2019	
No Discharge:		

PARAMETER		QUA	NTITY OR LOAD	ING	QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
PARAWETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	JAMPENG FREQUENCY	SAMPLING TIPE
pH (00400)	Sample Measurement	***	***	***	7.0	***	7.0	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	<5.0	<5.0	mg/L	1/month	24-Hr Composite
(Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	.017705	.548850	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	1/month	Grab
4	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
arbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	<3.0	<3.0	mg/L	1/month	24-Hr Composite
4	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments			*				+	ħ.	*	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

1596405

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Influent

	PERM	MIT NU	MBER		OUTF	ALL NU	IMBER				
	MONITORING PERIOD										
10	YEAR	МО	DAY		YEAR	МО	DAY				
FROM	2019	01	01	то	2019	01	31				

Reporting Frequency:	Monthly
DMR Effective From:	01/01/2019
DMR Effective To:	01/31/2019
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QUA	NTITY OR LOAD	DING	NG QUANTITY OR CONCENTRATION			N	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMPLING THE
Flow (50050)	Sample Measurement	.050	.068	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments			* **							



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
Influent Test Results (2 pages), January 2019.pdf	Other	2019-02-24T22:52:19-05:00	N/A
January 2019 - DMR Spreadsheet.pdf	Other	2019-02-24T22:52:43-05:00	N/A
Fecal Test Results, January 2019.pdf	Other	2019-02-24T22:51:51-05:00	N/A
Preliminary Monthly Climate Data, January 2019.pdf	Other	2019-02-24T22:53:16-05:00	N/A
Effluent Test Results, January 2019.pdf	Other	2019-02-24T22:51:25-05:00	N/A

PERMIT VIOLATIONS

	Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments
П	83034	01/01/2019	01/31/2019	Flow	Average Monthly	.05	.045	MGD	Influent (001)			

UNAUTHORIZED DISCHARGES

102									V	J			
1	Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified Orally	Comments

OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments
83032	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	24-Hr Composite	Grab	-
83033	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	24-Hr Composite	Grab	

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	(610)-373-6667

SUBMITTED BY GREENPORT USER	, , , , , , , , , , , , , , , , , , , ,	Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		(484)	334-3032	2019	2	28
stoltzfusd	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489
STAGE:	Final Effluent

		159640	5		001				
	PERM	MIT NU	MBER		OUTF	ALL NU	IMBER		
			MONITO	ORING	PERIOD				
10	YEAR	МО	DAY		YEAR	МО	DAY		
FROM	2019	02	01	то	2019	02	28		

Reporting Frequency:	Monthly
OMR Effective From:	02/01/2019
OMR Effective To:	02/28/2019
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
PARAWETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING TYPE
pH (00400)	Sample Measurement	***	***	***	6.78	***	6.78	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	<5.0	<5.0	mg/L	1/month	24-Hr Composite
(Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	31098	870740	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1.0	***	CFU/100 ml	1/month	Grab
	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
arbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	3.5	3.5	mg/L	1/month	24-Hr Composite
4	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments			*				+	*	*	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489
STAGE	Influent

		159640	5		001							
	PERM	MIT NU	MBER		OUTFALL NUMBER							
			MONITO	ORING	PERIOD							
	YEAR	МО	DAY		YEAR	МО	DAY					
FROM	ROM 2019 02 01				2019	02	28					

eporting Frequency:	Monthly	
MR Effective From:	02/01/2019	
MR Effective To:	02/28/2019	
ermit Expires:	02/29/2020	
ermit Application Due:	09/02/2019	
o Discharge:		

PARAMETER		QU	ANTITY OR LOAD	ING	QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMPLING I TPE
Flow (50050)	Sample Measurement	.047	.072	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
	Facility Parameter Comments	Willistown Townsh flows in portions of		nd they are in the pr	ocess of sending a let	tter to the neighborho	od to "educate" them a	about sump pumps c	onnected to the sewer system. Contacted floo	w meter company to rent meters to ider
Facility Sampling Point Comments	Willistown Township has bee	n contacted and they	are in the process of ser	nding a letter to the r	neighborhood to "educ	cate" them about sum	p pumps connected to	the sewer system. (Contacted flow meter company to rent meters	to identify high flows in portions of



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
February 2019 - DMR Spreadsheet.pdf	Other	2019-03-27T15:55:41-04:00	N/A
Influent Test Results (2 pages), February 2019.pdf	Other	2019-03-27T15:54:11-04:00	N/A
Fecal Test Results, February 2019.pdf	Other	2019-03-27T15:54:55-04:00	N/A
Effluent Test Results, February 2019.pdf	Other	2019-03-27T15:54:35-04:00	N/A
Preliminary Monthly Climate Data, February 2019.pdf	Other	2019-03-27T15:55:14-04:00	N/A

PERMIT VIOLATIONS

ſ	Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments
	84491	02/01/2019	02/28/2019	Flow	Average Monthly	.047	.045	MGD	Influent (001)			

UNAUTHORIZED DISCHARGES

10									V				
1	Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified Orally	Comments

OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments
84489	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	24-Hr Composite	Grab	-
84490	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	24-Hr Composite	Grab	

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
Due to the high influent flow, Willistown Township was contacted. They were preparing a mailer to send to the neighborhood to "educate" them about sump pumps connected to the sewer system. Also contacting a flow meter company to rent meters to identify high flows in portions of the system.		Т3293	(610)-373-6667

SUBMITTED BY GREENPORT USER		Daniella Steltzfus	TELEPHO	ONE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		(484)	334-3032	2019	3	27
stoltzfusd	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

1596405

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

	PERI	MIT NU	MBER		OUTF	ALL NU	IMBER
	١.,		MONITO	DRING	PERIOD		
	YEAR	МО	DAY		YEAR	МО	DAY
ROM	2019	03	01	то	2019	03	31
					_		-

Reporting Frequency:	Monthly	
MR Effective From:	03/01/2019	
OMR Effective To:	03/31/2019	
Permit Expires:	02/29/2020	
Permit Application Due:	09/02/2019	
lo Discharge:		

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	ON	SAMPLING EDECLIENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING ITPE
pH (00400)	Sample Measurement	***	***	***	6.98	***	6.98	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	<5.0	<5.0	mg/L	1/month	24-Hr Composite
(Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	.033433	1.036410	MGD	***	***	*** *** *	***	Continuous	Metered
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1.0	***	CFU/100 ml	1/month	Grab
-	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	<3.0	<3.0	mg/L	1/month	24-Hr Composite
4	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments		4			•		4	+	*	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Influent

		159640	5		001					
	PERM	MIT NU	MBER		OUTFALL NUMBER					
ď			MONITO	ORING	PERIOD					
	YEAR	МО	DAY		YEAR	МО	DAY			
FROM	2019	03	01	то	2019	03	31			

Reporting Frequency:	Monthly
DMR Effective From:	03/01/2019
DMR Effective To:	03/31/2019
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QUA	ANTITY OR LOADING QUANTITY OR CONCENTRATION					SAMPLING FREQUENCY	SAMPLING TYPE	
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMPLING I TPE
Flow (50050)	Sample Measurement	.049	1.518	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments	Willistown Township Public Wo	rks has located an u	inidentified connection v	which is creating hyd	raulic overloads. Line	has been plugged to	prevent additional flo	w.		



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
Fecal Test Results, March 2019.pdf	Other	2019-04-26T14:20:04-04:00	N/A
March 2019 - DMR Spreadsheet.pdf	Other	2019-04-26T14:19:18-04:00	N/A
Preliminary Monthly Climate Data, March 2019.pdf	Other	2019-04-26T14:18:52-04:00	N/A
Effluent Test Results, March 2019.pdf	Other	2019-04-26T14:20:25-04:00	N/A
Influent Test Results (2 pages), March 2019.pdf	Other	2019-04-26T14:19:43-04:00	N/A

PERMIT VIOLATIONS

							er .		`		
Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments
86638	03/01/2019	03/31/2019	Flow	Average Monthly	.049	.045	MGD	Influent (001)			

UNAUTHORIZED DISCHARGES

302						<i>i</i> — 3			V	2			
1	Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified Orally	Comments

OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments
86636	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	24-Hr Composite	Grab	-
86637	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	24-Hr Composite	Grab	

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
Willistown Township Public Works has located an unidentified connection to the sewer line which is creating hydraulic overload. Line has been plugged to prevent additional flow.	Matthew Boggs	T3293	(610)-373-6667

SUBMITTED BY GREENPORT USER	*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a	Danielle Stoltzfus	TELEPHONE		DATE		
	system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		(484)	334-3032	2019	4	26
stoltzfusd	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

	159640	5			001	
PERM	MIT NU	MBER		OUTF	ALL NU	IMBER
		MONITO	ORING	PERIOD		
YEAR	МО	DAY		YEAR	МО	DAY
2019	04	01	то	2019	04	30
	PERM	PERMIT NU	YEAR MO DAY	PERMIT NUMBER MONITORING YEAR MO DAY	PERMIT NUMBER OUTFA MONITORING PERIOD YEAR MO DAY YEAR	PERMIT NUMBER OUTFALL NU MONITORING PERIOD YEAR MO DAY YEAR MO

Reporting Frequency:	Monthly	
OMR Effective From:	04/01/2019	
OMR Effective To:	04/30/2019	
Permit Expires:	02/29/2020	
Permit Application Due:	09/02/2019	
lo Discharge:		

PARAMETER		QUANTITY OR LOADING		QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE	
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING TIPE
pH (00400)	Sample Measurement	***	***	***	6.83	***	6.83	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	<5.0	<5.0	mg/L	1/month	Composite
	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	.042313	1.269390	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	10.4	***	CFU/100 ml	1/month	Grab
	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	<3.0	<3.0	mg/L	1/month	Composite
4	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments		1	*				4	+	*	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY	
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302	į
FACILITY:	PENNS PRESERVE STP	
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489	
STAGE:	Influent	7

		159640)5			001	
	PERM	MIT NU	MBER		OUTF	ALL NU	MBER
			MONITO	ORING	PERIOD		
	YEAR	МО	DAY		YEAR	МО	DAY
FROM	2019	04	01	то	2019	04	30

Reporting Frequency:	Monthly
DMR Effective From:	04/01/2019
DMR Effective To:	04/30/2019
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	JAMIPLING PREQUENCY	SAMPLING TIPE
Flow (50050)	Sample Measurement	.041	.059	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments										



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
Effluent Test Results, April 2019.pdf	Other	2019-05-28T13:24:40-04:00	N/A
April 2019 - DMR Spreadsheet.pdf	Other	2019-05-28T13:24:21-04:00	N/A
Fecal Test Results, April 2019.pdf	Other	2019-05-28T13:25:01-04:00	N/A
Influent Test Results (2 pages), April 2019.pdf	Other	2019-05-28T13:25:25-04:00	N/A
Preliminary Monthly Climate Data, April 2019.pdf	Other	2019-05-28T13:25:47-04:00	N/A

PERMIT VIOLATIONS

\Box	Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments

UNAUTHORIZED DISCHARGES

Non-Compliance ID Event Start Date Event End Date	Date and Time Discovered Substance Event Location Discharged	Volume (gal) Duration (hrs) Receiving Waters	s Impact On Waters Cause Of Discharge	Date and Time DEP Notified Comments Orally
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OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments
88407	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	Composite	Grab	
88408	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Composite	Grab	1

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	(610)-373-6667

SUBMITTED BY GREENPORT USER	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the	Danielle Stoltzfus	TELEPHONE		DATE		
	system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of		(484)	334-3032	2019	5	28
stoltzfusd	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

	159640)5			001	
PERM	⁄IIT NUI	MBER		OUTF	ALL NU	MBER
1		MONITO	ORING	PERIOD		
YEAR	МО	DAY		YEAR	МО	DAY
2019	05	01	то	2019	05	31
	PERM	PERMIT NU	YEAR MO DAY	PERMIT NUMBER MONITORING YEAR MO DAY	PERMIT NUMBER OUTFA MONITORING PERIOD YEAR MO DAY YEAR	PERMIT NUMBER OUTFALL NU MONITORING PERIOD YEAR MO DAY YEAR MO

Reporting Frequency:	Monthly
OMR Effective From:	05/01/2019
OMR Effective To:	05/31/2019
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
lo Discharge:	

PARAMETER		QUANTITY OR LOADING			Q	UANTITY OR C	ONCENTRATIO	ON	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	TS VALUE VALUE VALUE		VALUE	UNITS	SAMPLING FREQUENCY	SAWIPLING TIFE
pH (00400)	Sample Measurement	***	***	***	6.61	***	6.61	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	<5.0	<5.0	mg/L	1/month	Composite
	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	.037601	1.165630	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1.0	***	CFU/100 ml	1/month	Grab
	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	<3.0	<3.0	mg/L	1/month	Composite
4	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments			+		•			-	+	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY	
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302	
FACILITY:	PENNS PRESERVE STP	
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489	
STAGE:	Influent	7

	4	159640 MIT NU			OUTF	001 ALL NU	MBER
Ė			MONITO	ORING	PERIOD		
	YEAR	МО	DAY		YEAR	МО	DAY
FROM	2019	05	01	то	2019	05	31

Reporting Frequency:	Monthly
DMR Effective From:	05/01/2019
DMR Effective To:	05/31/2019
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QU/	ANTITY OR LOADING QUANTITY OR CONCENTRATION			N	SAMPLING FREQUENCY	SAMPLING TYPE		
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAIVIFLING TIPE
Flow (50050)	Sample Measurement	.041	.059	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments										



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
May 2019 - DMR Spreadsheet.pdf	Other	2019-06-24T14:29:45-04:00	N/A
Influent Test Results (2 pages), May 2019.pdf	Other	2019-06-24T14:30:05-04:00	N/A
Preliminary Monthly Climate Data, May 2019.pdf	Other	2019-06-24T14:31:08-04:00	N/A
Effluent Test Results, May 2019.pdf	Other	2019-06-24T14:30:24-04:00	N/A
Fecal Test Results, May 2019.pdf	Other	2019-06-24T14:30:47-04:00	N/A

PERMIT VIOLATIONS

	Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments
1.0												

UNAUTHORIZED DISCHARGES

Non-Compliance ID Event Start Date Event End Date Date and Time Discovered Dischar	Event Location Volu	olume (gal) Duration (hrs) Rece	ceiving Waters Impact On Waters Cause Of Discharge	Date and Time DEP Notified Comments Orally
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OTHER PERMIT VIOLATIONS

	Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments
Г	89687	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Composite	Grab	
	89688	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	Composite	Grab	1

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	(610)-373-6667

SUBMITTED BY GREENPORT USER	*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		TELEPHONE		DATE		
	system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of		(484)	334-3032	2019	6	24
stoltzfusd	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

	159640	5			001	
PERM	/IT NU	MBER		OUTF	ALL NU	MBER
		MONITO	ORING	PERIOD		
YEAR MO DAY				YEAR	МО	DAY
2019	06	01	то	2019	06	30
	PERM	PERMIT NU	PERMIT NUMBER MONITO YEAR MO DAY	PERMIT NUMBER MONITORING YEAR MO DAY	PERMIT NUMBER OUTFA MONITORING PERIOD YEAR MO DAY YEAR	PERMIT NUMBER OUTFALL NU MONITORING PERIOD YEAR MO DAY YEAR MO

eporting Frequency:	Monthly	
MR Effective From:	06/01/2019	
MR Effective To:	06/30/2019	
ermit Expires:	02/29/2020	
ermit Application Due:	09/02/2019	
lo Discharge:		

DADAMETED		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMPLING ITPE
pH (00400)	Sample Measurement	***	***	***	7.22	***	7.22	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	5.0	5.0	mg/L	1/month	Composite
	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	.028238	.847140	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	1/month	Grab
	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	4.1	4.1	mg/L	1/month	Composite
4	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments		1	-				4	+	ž	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

1596405

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Influent

	PERM	MIT NU	MBER		OUTF	ALL NU	MBER					
- 11	MONITORING PERIOD											
	YEAR	МО	DAY	771	YEAR	МО	DAY					
FROM	2019	06	01	то	2019	06	30					

001

Reporting Frequency:	Monthly
DMR Effective From:	06/01/2019
DMR Effective To:	06/30/2019
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QUA	ANTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	JAMIFLING FREQUENCY	SAMPLING TIPE
Flow (50050)	Sample Measurement	.032	.041	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments										



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
Influent Test Results (2of2), June 2019.pdf	Other	2019-07-29T11:34:56-04:00	N/A
Influent Test Results (1of2), June 2019.pdf	Other	2019-07-29T11:33:42-04:00	N/A
Fecal Test Results, June 2019.pdf	Other	2019-07-29T11:32:54-04:00	N/A
Effluent Test Results, June 2019.pdf	Other	2019-07-29T11:32:29-04:00	N/A
Preliminary Monthly Climate Data, June 2019.pdf	Other	2019-07-29T11:32:05-04:00	N/A
June 2019 - DMR Spreadsheet.pdf	Other	2019-07-29T11:31:38-04:00	N/A

PERMIT VIOLATIONS

	П	Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments
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UNAUTHORIZED DISCHARGES

100									V			City Company	E-m
4	Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified Orally	Comments

OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments
93718	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Composite	Grab	
93719	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	Composite	Grab	
93720	Late DMR Submission					

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
Computer / Network complications prevented us from submitting 7/28/19. System was repaired by 11:00 a.m.	Matthew Boggs	T3293	(610)-373-6667

SUBMITTED BY GREENPORT USER		Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		(484)	334-3032	2019	7	29
stoltzfusd	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

		159640	5			001					
	PERM	MIT NUI	MBER		OUTF	ALL NU	MBER				
	MONITORING PERIOD										
10	YEAR	МО	DAY		YEAR	МО	DAY				
FROM	2019	07	01	то	2019	07	31				

Reporting Frequency:	Monthly
OMR Effective From:	07/01/2019
OMR Effective To:	07/31/2019
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
lo Discharge:	

PARAMETER		QUA	NTITY OR LOAD	ING	Q	UANTITY OR C	ONCENTRATIO	ON	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING TIPE
pH (00400)	Sample Measurement	***	***	***	7.24	***	7.24	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	5.0	5.0	mg/L	1/month	Composite
(Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	.066606	2.064800	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1.0	***	CFU/100 ml	1/month	Grab
	Permit Requirement	***	***		***	200 Geo Mean	***	GI 0/100 IIII	1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	4.5	4.5	mg/L	1/month	Composite
4	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments		1	*				+	*	*	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY	-
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302	
FACILITY:	PENNS PRESERVE STP	
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489	
STACE:	Influent	

		159640	5			001						
	PERM	/IT NU	MBER		OUTF	ALL NU	IMBER					
		MONITORING PERIOD										
	YEAR	МО	DAY		YEAR	МО	DAY					
FROM	2019	07	01	то	2019	07	31					

Reporting Frequency:	Monthly
DMR Effective From:	07/01/2019
DMR Effective To:	07/31/2019
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
FARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMPLING TIPE
Flow (50050)	Sample Measurement	.031	.037	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments										



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
Effluent Test Results, July 2019.pdf	Other	2019-08-28T17:37:56-04:00	N/A
Fecal Test Results, July 2019.pdf	Other	2019-08-28T17:38:26-04:00	N/A
Influent Test Results, July 2019 (1of2).pdf	Other	2019-08-28T17:38:48-04:00	N/A
Influent Test Results, July 2019 (2of2).pdf	Other	2019-08-28T17:39:33-04:00	N/A
July 2019 - DMR Spreadsheet.pdf	Other	2019-08-28T17:39:59-04:00	N/A
Preliminary Monthly Climate Data, July 2019.pdf	Other	2019-08-28T17:40:26-04:00	N/A

PERMIT VIOLATIONS

- [Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments

UNAUTHORIZED DISCHARGES

10.									V				
8	Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified Orally	Comments

OTHER PERMIT VIOLATIONS

Non-Compliance ID	Sample type not in accordance with permit Final Effluent (001)		Parameter	Reported Value	Permit Limit	Comments
96308	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	Composite	Grab	
96309	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Composite	Grab	

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	(610)-373-6667

SUBMISSION INFORMATION

SUBMITTED BY GREENPORT USER	, , , , , , , , , , , , , , , , , , , ,	Danielle Stoltzfus	TELEPHO	NE	DATE		
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		(484)	334-3032	2019	8	28
stoltzfusd	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).		AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY	_
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302	5
FACILITY:	PENNS PRESERVE STP	
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489	
STAGE:	Final Effluent	-

		159640	5			001					
	PERM	MIT NU	MBER		OUTF	ALL NU	MBER				
		MONITORING PERIOD									
	YEAR	YEAR MO DAY			YEAR	МО	DAY				
FROM	2019	08	01	то	2019	08	31				

Reporting Frequency:	Monthly
OMR Effective From:	08/01/2019
OMR Effective To:	08/31/2019
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QUA	NTITY OR LOAD	ING	Q	UANTITY OR C	ONCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING ITPE
pH (00400)	Sample Measurement	***	***	***	7.24	***	7.24	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	7.2	7.2	mg/L	1/month	Composite
	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	.061867	1.917869	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	1/month	Grab
4	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	<3.0	<3.0	mg/L	1/month	Composite
	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments					•				*	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489
STAGE:	Influent

	4	159640 MIT NU			OUTF	001 ALL NU	MBER				
		MONITORING PERIOD									
	YEAR	МО	DAY		YEAR	МО	DAY				
FROM	2019	08	01	то	2019	08	31				

Paparting Fraguency	Monthly
Reporting Frequency:	MOTHITY
DMR Effective From:	08/01/2019
DMR Effective To:	08/31/2019
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
FARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMPLING TIPE
Flow (50050)	Sample Measurement	.028	.038	MGD	***	***	***	***	Continuous	Metered
Tion (cocce)	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments							Y			



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
August 2019 - DMR Spreadsheet.pdf	Other	2019-09-27T13:44:18-04:00	N/A
Influent Test Results (1of2) - August 2019.pdf	Other	2019-09-27T13:45:42-04:00	N/A
Preliminary Monthly Climate Data - August 2019.pdf	Other	2019-09-27T13:46:29-04:00	N/A
Effluent Test Results - August 2019.pdf	Other	2019-09-27T13:44:57-04:00	N/A
Fecal Test Results - August 2019.pdf	Other	2019-09-27T13:45:20-04:00	N/A
Influent Test Results (2of2) - August 2019.pdf	Other	2019-09-27T13:46:06-04:00	N/A

PERMIT VIOLATIONS

	Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments
4												

UNAUTHORIZED DISCHARGES

10		and the second second							V			C. C.	
1	Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified Orally	Comments

OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type Sampling Point		Parameter	Reported Value	Permit Limit	Comments
97956	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Composite	Grab	
97957	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	Composite	Grab	

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
N/A	Matthew Boggs	T3293	(610)-373-6667

SUBMISSION INFORMATION

SUBMITTED BY GREENPORT USER	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a	Danielle Stoltzfus	TELEPHONE		DATE		
	system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the	- 1	(484)	334-3032	2019	9	27
stoltzfusd	the person or persons who manage the system of those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

			_							
	PER	MIT NU	MBER		OUTF	OUTFALL NUMBER				
			MONITO	DRING	PERIOD		, T			
	YEAR	МО	DAY		YEAR	МО	DAY			
ROM	2019	09	01	то	2019	09	30			

Reporting Frequency:	Monthly	
MR Effective From:	09/01/2019	
OMR Effective To:	09/30/2019	
Permit Expires:	02/29/2020	
Permit Application Due:	09/02/2019	
lo Discharge:		

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE	
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING TIPE	
pH (00400)	Sample Measurement	***	***	***	7.34	***	7.34	S.U.	1/month	Grab	
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab	
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	6.2	6.2	mg/L	1/month	Composite	
(Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab	
Flow (50050)	Sample Measurement	.012101	.363041	MGD	***	***	***	***	Continuous	Metered	
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered	
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	1/month	Grab	
4	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab	
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	<3.0	<3.0	mg/L	1/month	Composite	
4	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab	
Facility Sampling Point Comments		1							-		



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489
STAGE:	Influent

	4	159640 MIT NU			001 OUTFALL NUMBER			
			MONITO	DRING	PERIOD			
- 4	YEAR	МО	DAY		YEAR	МО	DAY	
FROM	2019	09 01		то	2019	09	30	

Reporting Frequency:	Monthly
DMR Effective From:	09/01/2019
DMR Effective To:	09/30/2019
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	JAMPLING PREQUENCY	SAMPLING TIPE
Flow (50050)	Sample Measurement	.026	.042	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments							· ·			



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
September 2019 - DMR Spreadsheet.pdf	Other	2019-10-28T13:37:26-04:00	N/A
Preliminary Monthly Climate Data - September 2019.pdf	Other	2019-10-28T13:39:33-04:00	N/A
Effluent Test Results - September 2019.pdf	Other	2019-10-28T13:38:47-04:00	N/A
Influent Test Results - September 2019 (2of2).pdf	Other	2019-10-28T13:38:15-04:00	N/A
Influent Test Results - September 2019 (1of2).pdf	Other	2019-10-28T13:37:52-04:00	N/A
Fecal Test Results - September 2019.pdf	Other	2019-10-28T13:39:12-04:00	N/A

PERMIT VIOLATIONS

	1102,1110110				2.00							
No	on-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments

UNAUTHORIZED DISCHARGES

30.									V		v -	City Company	E-m
	Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified Orally	Comments

OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments
99814	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	Composite	Grab	
99815	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Composite	Grab	

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
Both of the influent pumps were replaced. During this replacement, the system was on bypass from 9/6 - 9/20. Further information to be provided in October report.	Matthew Boggs	T3293	(610)-373-6667

SUBMISSION INFORMATION

SUBMITTED BY GREENPORT USER		Danielle Stoltzfus	TELEPHO	DATE			
system	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).		(484)	334-3032	2019	10	28
stoltzfusd		SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

1596405

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

	PERI	MIT NU	MBER		OUTF	ALL NU	MBER				
			MONITO	DRING	PERIOD		, 1				
14	YEAR	МО	DAY		YEAR	МО	DAY				
ROM	2019	10	01	то	2019	10	31				

Reporting Frequency:	Monthly
DMR Effective From:	10/01/2019
DMR Effective To:	10/31/2019
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QUA	NTITY OR LOAD	ING	QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMI LING I II L
pH (00400)	Sample Measurement	***	***	***	7.73	***	7.73	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	<5.0	<5.0	mg/L	1/month	Composite
(Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	.015925	.493662	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1.0	***	CFU/100 ml	1/month	Grab
4	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	<3.0	<3.0	mg/L	1/month	Composite
4	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments			*		•			+	7	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Influent

		159640 MIT NU			OUTF	001 ALL NU	MBER
H	١.,		MONITO	ORING	PERIOD		
- 4	YEAR MO DAY				YEAR	МО	DAY
FROM	2019	10	01	то	2019	10	31

Reporting Frequency:	Monthly
DMR Effective From:	10/01/2019
DMR Effective To:	10/31/2019
Permit Expires:	02/29/2020
Permit Application Due:	09/02/2019
No Discharge:	

PARAMETER		QUANTITY OR LOADING		QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE	
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMPLING TIPE
Flow (50050)	Sample Measurement	.024	.029	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments										



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
Fecal Test Results - October 2019.pdf	Other	2019-11-27T08:17:24-05:00	N/A
Effluent Test Results - October 2019.pdf	Other	2019-11-27T08:16:54-05:00	N/A
October 2019 - DMR Spreadsheet.pdf	Other	2019-11-27T08:18:41-05:00	N/A
Influent Test Results - October 2019 (2 pages).pdf	Other	2019-11-27T08:18:16-05:00	N/A
Preliminary Monthly Climate Data - October 2019.pdf	Other	2019-11-27T08:19:48-05:00	N/A

PERMIT VIOLATIONS

- 15,	Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments
- 1						-						

UNAUTHORIZED DISCHARGES

Non-Compliance ID Event Start Date Event End Date Date and Time Discovered Substance Discharge	Event Location Volu	olume (gal) Duration (hrs) Receiv	eiving Waters Impact On Waters Cause Of Discharge D	Date and Time DEP Notified Comments Orally
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OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type Sampling Point		Parameter	Reported Value	Permit Limit	Comments
101775	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Composite	Grab	
101776	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	Composite	Grab	1

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number	
N/A	Matthew Boggs	T3293	(610)-373-6667	

SUBMISSION INFORMATION

SUBMITTED BY GREENPORT USER		Danielle Stoltzfus	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		(484)	334-3032	2019	11	27
stoltzfusd	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Final Effluent

		159640	5			001								
	PERM	ЛІТ NU	MBER		OUTF	ALL NU	IMBER							
		MONITORING PERIOD												
10	YEAR	МО	DAY		YEAR	МО	DAY							
FROM	2019	11	01	то	2019	11	30							

Reporting Frequency:	Monthly	
DMR Effective From:	11/01/2019	
DMR Effective To:	11/30/2019	
Permit Expires:	02/29/2020	
Permit Application Due:	09/02/2019	
No Discharge:		

PARAMETER		QUA	NTITY OR LOAD	ING	QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING ITPE
pH (00400)	Sample Measurement	***	***	***	8.6	***	8.6	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	<5.0	<5.0	mg/L	1/month	Composite
(Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	.028328	.849853	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1.0	***	CFU/100 ml	1/month	Grab
	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	3.5	3.5	mg/L	1/month	Composite
	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments		1	-				-	+	3	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY	
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302	
FACILITY:	PENNS PRESERVE STP	
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489	
STAGE:	Influent	ì

	4	159640 ИІТ NU			OUTF	001 ALL NU	IMBER							
H		MONITORING PERIOD												
	YEAR	МО	DAY		YEAR	МО	DAY							
FROM	2019	11	01	то	2019	11	30							

eporting Frequency:	Monthly	
MR Effective From:	11/01/2019	
MR Effective To:	11/30/2019	
ermit Expires:	02/29/2020	
ermit Application Due:	09/02/2019	
lo Discharge:		

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE	
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMPLING TIPE	
Flow (50050)	Sample Measurement	.026	.037	MGD	***	***	***	***	Continuous	Metered	
1 low (50050)	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered	
Facility Sampling Point Comments											



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
Influent Test Results - November 2019 (2of2).pdf	Other	2019-12-26T15:39:20-05:00	N/A
November 2019 - DMR Spreadsheet.pdf	Other	2019-12-26T15:38:25-05:00	N/A
Effluent Test Results - November 2019.pdf	Other	2019-12-26T15:40:02-05:00	N/A
Fecal Test Results - November 2019.pdf	Other	2019-12-26T15:40:27-05:00	N/A
Preliminary Monthly Climate Data - November 2019.pdf	Other	2019-12-26T15:40:53-05:00	N/A
Influent Test Results - November 2019 (1of2).pdf	Other	2019-12-26T15:38:49-05:00	N/A

PERMIT VIOLATIONS

					V.						
Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments

UNAUTHORIZED DISCHARGES

30.									V		v -	City Company	E-m
	Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified Orally	Comments

OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments
103188	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Composite	Grab	-
103189	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	Composite	Grab	

COMMENT DETAILS

Γ	Comments	Operator Name	Operator Certification Number	Operator Contact Number		
	Influent test result are high. The two (2) pumps in the pump station were upgraded and when the sample line was returned to the wet well, it was placed in a high solids area. The location of the sample line will be relocated in December 2019.	Matthew Boggs	T3293	(610)-373-6667		

SUBMISSION INFORMATION

SUBMITTED BY GREENPORT USER		Danielle Stoltzfus	TELEPHO	NE		DATE	
1	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		(484)	334-3032	2019	12	26
stoltzfusd	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY	
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302	j
FACILITY:	PENNS PRESERVE STP	
LOCATION:	2 SUGARTOWN RD, MALVERN PA, 19355-2489	
STAGE:	Final Effluent	Ī

		159640	5			001	
	PERM	MIT NU	MBER		OUTF	ALL NU	IMBER
			MONITO	RING	PERIOD		
10	YEAR	МО	DAY		YEAR	МО	DAY
FROM	2019 12 01			то	2019	12	31

Reporting Frequency:	Monthly	
OMR Effective From:	12/01/2019	
OMR Effective To:	12/31/2019	
Permit Expires:	02/29/2020	
Permit Application Due:	09/02/2019	
No Discharge:		
		_

PARAMETER		QUA	NTITY OR LOAD	ING	Q	UANTITY OR C	ONCENTRATIO	N	CAMPLING EDECLIENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMI LING I II L
pH (00400)	Sample Measurement	***	***	***	7.33	***	7.33	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	8	8	mg/L	1/month	Composite
	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	.001715	.0053115	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***	1 1	Continuous	Metered
	Facility Parameter Comments	Recorded value is e	ffluent dispersal, not in	fluent flow into facilit	у					
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	1	***	CFU/100 ml	1/month	Grab
	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	3.5	3.5	mg/L	1/month	Composite
	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments			-					4	1	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 2 SUGARTOWN RD, MALVERN PA, 19355-2489

STAGE: Influent

		159640 ИІТ NU			OUTE	001 ALL NU	IMBFR
H				DRING	PERIOD		
	YEAR	МО	DAY		YEAR	МО	DAY
FROM	2019 12		01	то	2019	12	31

eporting Frequency:	Monthly	
MR Effective From:	12/01/2019	
MR Effective To:	12/31/2019	
ermit Expires:	02/29/2020	
ermit Application Due:	09/02/2019	
o Discharge:		

PARAMETER		QUANTITY OR LOADING			Q	UANTITY OR C	ONCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAWIFLING TIFE
Flow (50050)	Sample Measurement	0.000	0.000	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
	Facility Parameter Comments	Flow numbers requ	uired prior to updating. In	fo not available at s	ubmission				*	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
Climate December 2019.pdf	Other	2020-01-28T22:40:57-05:00	Climate / Weather data
Effluent Sample December 2019.pdf	Laboratory Analytical Report	2020-01-28T22:31:26-05:00	
December 2019 - DMR Spreadsheet.pdf	Daily Effluent Monitoring Form	2020-01-28T22:39:54-05:00	
Daily Recordings and Lab Results.pdf	Daily Effluent Monitoring Form	2020-01-28T22:36:18-05:00	Attachment also includes Fecal lab result
December 2019 - DMR Spreadsheet.pdf	Influent and Process Control Form	2020-01-30T16:06:40-05:00	Same as previous worksheet, now with revised Influent flow

PERMIT VIOLATIONS

				~					·		
Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments

UNAUTHORIZED DISCHARGES

Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified Orally	Comments
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OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments
105955	Sample type not in accordance with permit	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	Composite	Grab	- 1
105956	Sample type not in accordance with permit	Final Effluent (001)	Total Suspended Solids	Composite	Grab	7
105958	Violation of permit condition					t is preferred to take composite samples for effluent CBOD and TSS than aking grab samples

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
Revised attachment now has influent flow values	Matthew Boggs	192623	(610)-373-6667

SUBMISSION INFORMATION

SUBMITTED BY GREENPORT USER		Boggs Matthew	TELEPHO	NE		DATE	
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the	33	(610)	373-6667	2020	1	30
matthewb	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073

STAGE: Final Effluent

1596405 PERMIT NUMBER **OUTFALL NUMBER** MONITORING PERIOD МО YEAR MO DAY YEAR DAY 01 2020 01 2020 01 31 **FROM** TO

Reporting Frequency: Monthly

DMR Effective From: 01/01/2020

DMR Effective To: 01/31/2020

Permit Expires: 02/29/2020

Permit Application Due: 09/02/2019

No Discharge:

PARAMETER		QUA	NTITY OR LOAD	ING	Q	UANTITY OR C	ONCENTRATIC	N	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING TIPE
pH (00400)	Sample Measurement	***	***	***	***	***	***	S.U.		
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	***	mg/L	4, 4	
	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	***	***	MGD	***	***	***	***		
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	***	***	CFU/100 ml		
4	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	***	***	mg/L		
4	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments			*						*	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073
STAGE:	Influent

		159640)5		001 OUTFALL NUMBER				
	PERM	ЛІТ NU	MBER						
			MONITO	ORING	PERIOD				
	YEAR	МО	DAY		YEAR	МО	DAY		
FROM	2020	01	01	то	2020	01	31		

Reporting Frequency:	Monthly	
DMR Effective From:	01/01/2020	
DMR Effective To:	01/31/2020	
Permit Expires:	02/29/2020	
Permit Application Due:	09/02/2019	
No Discharge:		

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING TYPE
Flow (50050)	Sample Measurement	.045	.045	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments										



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

	File Name				Att	achment Type			Uploaded Tim	ne		,	Attachment Comments		
ERMIT VIOLATIONS	5														
Non-Compliance ID	Event Start Date Even	nt End Date	Parameter	Limit Type	Reported Value	Value Permit Limit Unit Sampling			g Point	Cause Of Non-0	Compliance	Correcti	ve Action	C	omments
NAUTHORIZED DIS	CHARGES														
Non-Compliance ID	Event Start Date Even	nt End Date	Date and Time Disco		tance Ev	vent Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of	Discharge	Date and Time DEI Orally	P Notified	Comments
THER PERMIT VIOL	LATIONS		- 4.7							_					
Non-Compliance ID	Non-Cor	mpliance Type	+	Sa	mpling Point	+	Para	ameter	Reported Value				Permit Limit Com		
OMMENT DETAILS		comments			1	0	perator Name		0	Operator Certification	Number		Operato	or Contact Numb	er
OMMENT DETAILS		comments					perator Name Kevin Brophy		O	Operator Certification 342859	Number		•	or Contact Numb	er
OMMENT DETAILS	Со	comments							0	·	Number	Į.	•		per
	MATION *Pursuant to the Perelectronic transactions	nnsylvania E	e Commonwealth	of Pennsylva	nia. You are sub	anuary 15, 2002 omitting official i	Kevin Brophy 2, you are about nformation. You	certify under		342859	Number TELEPHC	DNE	•		er
JBMISSION INFOR	MATION *Pursuant to the Per electronic transac penalty of law that the system designed to	nnsylvania E ction with the this docume o assure tha	e Commonwealth nt and all attachm	of Pennsylva ents were pre nel gather an	nia. You are sub epared under yo d evaluate the ir	anuary 15, 2002 omitting official i ur direction or s offormation subm	Kevin Brophy 2, you are about nformation. You upervision in accontited. Based on	certify under cordance with a your inquiry of	o Mike Bosti	342859		DNE 286-8245	•	184)-431-7497	28



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073

STAGE: Final Effluent

		159640	5			001				
	PERI	MIT NUI	MBER		OUTF	ALL NU	IMBER			
	١.,		MONITO	DRING I	PERIOD					
100	YEAR	МО	DAY		YEAR	МО	DAY			
FROM	2020	02	01	то	2020	02	29			

Reporting Frequency: Monthly

DMR Effective From: 02/01/2020

DMR Effective To: 02/29/2020

Permit Expires: 02/29/2020

Permit Application Due: 09/02/2019

No Discharge:

PARAMETER		QUA	NTITY OR LOAD	ING	Q	UANTITY OR C	ONCENTRATIC	N	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING TIPE
pH (00400)	Sample Measurement	***	***	***	***	***	***	S.U.		
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	***	mg/L	4, 4	
	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Flow (50050)	Sample Measurement	***	***	MGD	***	***	***	***		
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	***	***	CFU/100 ml		
4	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	***	***	mg/L		
4	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments			*						*	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073
STAGE:	Influent

		159640)5			001	
	PERM	MIT NU	MBER		OUTF	ALL NU	IMBER
			MONITO	ORING	PERIOD		
	YEAR	МО	DAY		YEAR	МО	DAY
FROM	2020	02	01	то	2020	02	29

Reporting Frequency:	Monthly	
DMR Effective From:	02/01/2020	
DMR Effective To:	02/29/2020	
Permit Expires:	02/29/2020	
Permit Application Due:	09/02/2019	
No Discharge:		

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE
FARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAWIPLING TIPE
Flow (50050)	Sample Measurement	.022985	.022985	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments										



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

	File Name		,		Attachn	ment Type			Uploaded Tim	ne			Attachment Commen	nts	
ERMIT VIOLATIONS															
Non-Compliance ID	Event Start Date	Parameter	Limit Type	Repor	ted Value	Permit Limit	Unit	Samplin	g Point	Cause Of Non-	Compliance	Correct	ive Action		Comments
NAUTHORIZED DIS	CHARGES														
Non-Compliance ID	Event Start Date Event End Date	Date and Time Disc		Substance Discharged	Event	Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause O	f Discharge	Date and Time DE Orally	P Notified	Comments
THER PERMIT VIOL	ATIONS														
Non-Compliance ID	Non-Compliance Ty	ре	†	Sampling F	oint	7	Para	ımeter		Reported Value	е		Permit Limit	7	Comments
MATERIA DETAIL O															
OMMENT DETAILS	Comments				Į	-	perator Name		C	Operator Certification	Number	į	•	or Contact Num	per
OMMENT DETAILS	Comments				ŀ	-	perator Name kevin brophy		C	Operator Certification 342859	Number		•	or Contact Num 84)-431-7297	per
						-			C	•	Number		•		oer
UBMISSION INFORI	MATION *Pursuant to the Pennsylvania electronic transaction with	he Commonwealt	th of Pennsy	/Ivania. Yo	u are submit	uary 15, 2002	kevin brophy , you are about nformation. You	certify under	Mike Bosti	342859	Number TELEPHO	DNE	•		per
UBMISSION INFORI	MATION *Pursuant to the Pennsylvania	he Commonwealt ent and all attach nat qualified perso	th of Pennsy ments were onnel gather	ylvania. Yo prepared and evalu	u are submit under your d ate the inforr	uary 15, 2002 tting official ir direction or su	kevin brophy T, you are about information. You upervision in accuitted. Based on	certify under cordance with a your inquiry of		342859		DNE 286-8245	•	84)-431-7297	per 28



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073

Final Effluent

1596405 001
PERMIT NUMBER OUTFALL NUMBER

 MONITORING PERIOD

 YEAR
 MO
 DAY
 YEAR
 MO
 DAY

 2020
 03
 01
 TO
 2020
 03
 31

FROM

Reporting Frequency: Monthly

DMR Effective From: 03/01/2020

DMR Effective To: 03/31/2020

Permit Expires: 02/28/2025

Permit Application Due: 09/01/2024

No Discharge:

PARAMETERS REPORTED VALUES

STAGE:

PARAMETER		QUA	NTITY OR LOAD	DING		QUANTITY OR CO	ONCENTRATIO	N	CAMPI INC EDECLIENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING TIPE
pH (00400)	Sample Measurement	***	***	***	***	***	***	S.U.		
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	Monitor & Report Avg Mo	***		1/month	Grab
Flow (50050)	Sample Measurement	***	***	MGD	***	1 ***	***	***		
4	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	***	***	CFU/100 ml		
1	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments										



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073
STAGE:	Influent

		159640	5			001	
	PERM	MIT NU	MBER		OUTF	ALL NU	MBER
			MONITO	ORING	PERIOD		
	YEAR	МО	DAY		YEAR	МО	DAY
FROM	2020	03	01	то	2020	03	31

Reporting Frequency:	Monthly
DMR Effective From:	03/01/2020
DMR Effective To:	03/31/2020
Permit Expires:	02/28/2025
Permit Application Due:	09/01/2024
No Discharge:	

PARAMETER		QUA	ANTITY OR LOAD	ING	Q	JANTITY OR C	ONCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMPLING THE
Flow (50050)	Sample Measurement	.029225	.029225	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments							Y			



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

	File Name					Attac	hment Type			Uploaded Time			A	ttachment Commen	nts	
PERMIT VIOLATIONS	s															
Non-Compliance ID	Event Start Date E	Event End Date	Parameter	Limit Typ	e Report	ed Value	Permit Limit	Unit	Sampli	ng Point	Cause Of Non-	Compliance	Correctiv	e Action	C	omments
INAUTHORIZED DIS	SCHARGES															
Non-Compliance ID	Event Start Date E	Event End Date	Date and Time Disc		Substance Discharged	Eve	nt Location	Volume (gal)	Duration (hrs)	Receiving Waters In	mpact On Waters	Cause O	f Discharge	Date and Time DEI Orally	P Notified	Comments
THER PERMIT VIO	LATIONS															
Non-Compliance ID	Non-	n-Compliance Type			Sampling P	oint	7	Para	ameter		Reported Valu	е	F	Permit Limit	+	Comments
OMMENT DETAILS		Comments						perator Name		Ор	perator Certification	Number	1		or Contact Numb	er
		Comments						perator Name Kevin Brophy		Ор	perator Certification 342859	Number			or Contact Numb 184)-431-7497	er
SUBMISSION INFOR SUBMITTED BY GREENPORT USER	MATION *Pursuant to the Felectronic trans	Pennsylvania l	e Commonwealtl	h of Penns	sylvania. You	ı are subn	nuary 15, 2002	Kevin Brophy I, you are about nformation. You	certify under	Op Mike Bostic	342859	Number TELEPHO	DNE			er
JBMISSION INFOR	*Pursuant to the Felectronic transpenalty of law that system designed	Pennsylvania lasaction with the at this documed to assure that	e Commonwealtl ent and all attachr	th of Penns ments were nnel gathe	sylvania. You e prepared u er and evalua	are subn Inder your ate the info	nuary 15, 2002 nitting official ir r direction or su ormation subm	Kevin Brophy T, you are about nformation. You upervision in accuitted. Based on	certify under cordance with a your inquiry of		342859		DNE 286-8245		184)-431-7497	28



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073
STAGE:	Final Effluent

		159640)5			001	
	PERM	MIT NU	MBER		OUTF	ALL NU	MBER
			MONITO	ORING	PERIOD		
10	YEAR	МО	DAY		YEAR	МО	DAY
FROM	2020	04	01	то	2020	04	30

Reporting Frequency:	Monthly
DMR Effective From:	04/01/2020
DMR Effective To:	04/30/2020
Permit Expires:	02/28/2025
Permit Application Due:	09/01/2024
No Discharge:	

PARAMETER		QUA	NTITY OR LOAD	DING		QUANTITY OR CO	ONCENTRATIO	ON	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMPLING TIPE
pH (00400)	Sample Measurement	***	***	***	8.8	***	9.0	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	E	E -	mg/L		
	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	E	***	mg/L		
	Permit Requirement	***	***		***	Monitor & Report Avg Mo	***		1/month	Grab
Flow (50050)	Sample Measurement	.007482	.224450	MGD	***	1 *** 1	***	***	Continuous	Metered
4	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	< 1	***	CFU/100 ml	1/month	Grab
1	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	[E]	E +	mg/L		
- 1	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments		*	* *					4		



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073
STAGE:	Influent

		159640)5			001		
	PERM	MIT NU	MBER		OUTF	ALL NU	MBER	
ď	Π.		MONITO	PERIOD				
	YEAR	МО	DAY		YEAR	МО	DAY	
FROM	2020	04	01	то	2020	04	30	

Reporting Frequency:	Monthly	
DMR Effective From:	04/01/2020	
DMR Effective To:	04/30/2020	
Permit Expires:	02/28/2025	
Permit Application Due:	09/01/2024	
No Discharge:		

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	OAIMI EINO TTI E
Flow (50050)	Sample Measurement	.029505	.029505	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments										



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
2297_001.pdf	Other	2020-06-04T15:44:42-04:00	Letter from the lab stating the results we do have for the month of April were late because of lab error.

PERMIT VIOLATIONS

		Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments
--	--	-------------------	------------------	----------------	-----------	------------	----------------	--------------	------	----------------	-------------------------	-------------------	----------

UNAUTHORIZED DISCHARGES

-													
	Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified Orally	Comments

OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments
113581	Use of NODI Code E or FF	Final Effluent (001)	Total Suspended Solids	Е	30	Lab experienced difficulties resulting from the COVID situation affecting availability of staffing and thus unfortunately resulting in esting submission issues (Lab letter has been attached to this DMR submission)
113582	Use of NODI Code E or FF	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	E	25	Lab experienced difficulties resulting from the COVID situation affecting availability of staffing and thus unfortunately resulting in esting submission issues (Lab letter has been attached to this DMR submission)
113583	Use of NODI Code E or FF	Final Effluent (001)	Total Nitrogen	E	Monitor & Report	Lab experienced difficulties resulting from the COVID situation affecting availability of staffing and thus unfortunately resulting in esting submission issues (Lab letter has been attached to this DMR submission)
113584	Use of NODI Code E or FF	Final Effluent (001)	Total Suspended Solids	E	60	Lab experienced difficulties resulting from the COVID situation affecting availability of staffing and thus unfortunately resulting in esting submission issues (Lab letter has been attache to this DMR submission)
113585	Use of NODI Code E or FF	Final Effluent (001)	Carbonaceous Biochemical Oxygen Demand (CBOD5)	E	50	Lab experienced difficulties resulting from the COVID situation affecting availability of staffing and thus unfortunately resulting in esting submission issues Lab letter has been attached to this DMR submission)
113586	Late DMR Submission					Lab experienced difficulties resulting from the COVID situation affecting availability of staffing and thus unfortunately resulting in esting submission issues (Lab letter has been attached to this DMR submission)

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
	kevin brophy	342859	(484)-431-7297

SUBMISSION INFORMATION

SUBMITTED GREENPORT		Mike Postie	TELEPHO	NE		DATE	
bosticm sys	system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		(302)	286-8245	2020	06	04
	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073
STAGE:	Final Effluent

		159640	5			001	
	PERI	MIT NUI	MBER		OUTF	ALL NU	MBER
			MONITO	ORING	PERIOD		
10	YEAR	МО	DAY		YEAR	МО	DAY
FROM	2020	05	01	то	2020	05	31

Reporting Frequency:	Monthly
DMR Effective From:	05/01/2020
DMR Effective To:	05/31/2020
Permit Expires:	02/28/2025
Permit Application Due:	09/01/2024
No Discharge:	

DADAMETED		QUA	NTITY OR LOAD	ING	QUANTITY OR CONCENTRATION				SAMPLING EDECLIENCY	SAMPLING TYPE	
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING THE	
pH (00400)	Sample Measurement	***	***	***	8.38	***	9.0	S.U.	1/month	Grab	
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab	
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	< 5	< 5	mg/L	1/month	Grab	
	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab	
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	FF	***	mg/L			
	Permit Requirement	***	***		***	Monitor & Report Avg Mo	***	1	1/month	Grab	
	Facility Parameter Comments	The permit sampling	g requirements do not h	ave Total Nitrogen	as one of the parame	eters for the spray effluer	nt sampling.				
Flow (50050)	Sample Measurement	.52742	1.635010	MGD	***	***	***	***	Continuous	Metered	
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered	
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	< 2	***	CFU/100 ml	1/month	Grab	
	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab	
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	3.2	3.2	mg/L	1/month	Grab	
	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073
STAGE:	Influent

		159640	5			001	
	PERM	MIT NU	MBER		OUTF	ALL NU	MBER
			MONITO	PERIOD			
	YEAR	МО	DAY		YEAR	МО	DAY
FROM	2020	05	01	то	2020	05	31

Reporting Frequency:	Monthly
OMR Effective From:	05/01/2020
OMR Effective To:	05/31/2020
Permit Expires:	02/28/2025
Permit Application Due:	09/01/2024
No Discharge:	

PARAMETER		QUA	ANTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE
FARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCT	SAMPLING TIPE
Flow (50050)	Sample Measurement	.028553	.028553	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments									"	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

	File Name			Attach	Attachment Type Uploaded Time			- 1	Attachment Comments						
PERMIT VIOLATIONS	3														
Non-Compliance ID	Event Start Date Event	t End Date	Parameter Lii	mit Type Rep	orted Value	Permit Limit	Unit	Samplin	g Point	Cause Of Non-Co	mpliance	Correctiv	ve Action	Co	mments
NAUTHORIZED DIS	CHARGES														
Non-Compliance ID	Event Start Date Event	nt End Date	Date and Time Discovere	d Substance Discharged		Location	Volume (gal)	Duration (hrs)	Receiving Waters Im	pact On Waters	Cause Of	Discharge	Date and Time DEP Orally	Notified	Comments
THER PERMIT VIO	ATIONS														
Non-Compliance ID	Non-Com	mpliance Type		Sampling	j Point	Parameter			Reported Value		F	Permit Limit		Comments	
115250	Use of NOD	DI Code E or F	F	Final Efflue	ent (001)	1 45	Total Nitrogen FF			FF		Mo	onitor & Report		
OMMENT DETAILS	^-														
	Con	mments				Operator Name			Operator Certification Number				Operator Contact Number		
						k	kevin brophy		342859				(484)-431-7297		
UBMISSION INFOR SUBMITTED BY GREENPORT USER	*Pursuant to the Penr									1	TELEPHO	NE		DATE	
penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of					Mike Bostic	(3	02)	286-8245	2020	06	28				
bosticm	the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).				SUBMITTED B FULL NAME	AREA	CODE	NUMBER	YEAR	МО	DAY				



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073
STAGE:	Final Effluent

		159640	5			001	
	PERM	MIT NUI	MBER		OUTF	ALL NU	MBER
			MONITO	ORING	PERIOD		
10	YEAR	МО	DAY		YEAR	МО	DAY
FROM	2020	06	01	то	2020	06	30

Reporting Frequency:	Monthly
DMR Effective From:	06/01/2020
DMR Effective To:	06/30/2020
Permit Expires:	02/28/2025
Permit Application Due:	09/01/2024
No Discharge:	

PARAMETER		QUA	NTITY OR LOAD	DING		QUANTITY OR CO	NCENTRATIC	ON	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMIFLING TIFE
pH (00400)	Sample Measurement	***	***	***	8.79	***	8.79	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	< 5	< 5	mg/L	1/month	Grab
	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	FF	***	mg/L		
	Permit Requirement	***	***		***	Monitor & Report Avg Mo	***		1/month	Grab
Flow (50050)	Sample Measurement	.018074	.54222	MGD	***	1 ***	***	***	Continuous	Metered
4	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	< 1	***	CFU/100 ml	1/month	Grab
1	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	< 3	< 3	mg/L	1/month	Grab
	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments		*	* *					4		



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073
STAGE:	Influent

	4	159640 MIT NU			OUTF	001 ALL NU	IMBER	
H			MONITO	DRING	PERIOD			
	YEAR	МО	DAY		YEAR	МО	DAY	
FROM	2020	06	01	то	2020	06	30	

Reporting Frequency:	Monthly
DMR Effective From:	06/01/2020
DMR Effective To:	06/30/2020
Permit Expires:	02/28/2025
Permit Application Due:	09/01/2024
No Discharge:	

PARAMETER		QUANTITY OR LOADING			Q	UANTITY OR C	ONCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAWFLING TIFE
Flow (50050)	Sample Measurement	.029394	.029394	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments										



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

	File Name				At	tachment Type			Uploaded Tir	me		A	ttachment Comments		
PERMIT VIOLATION	S														
Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Samplii	ng Point	Cause Of N	lon-Compliance	Correcti	ve Action	Comments	
UNAUTHORIZED DIS	SCHARGES														
Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discov	ered Substa Dischar		vent Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Water	s Cause C	f Discharge	Date and Time DEP Notified Orally	Commen	nts
OTHER PERMIT VIO	LATIONS														
Non-Compliance ID	se ID Non-Compliance Type Sampling Point				pling Point	4	Para	meter		Reported '	/alue	F	Permit Limit		
117884	7884 Use of NODI Code E or FF Final Effluent (001) Tota		Total	Nitrogen		FF	FF		nitor & Report	The most recent copy of the permit that I have does not show that total nitrogen esting is required. If this has peen changed then I will start esting for that parameter.					
COMMENT DETAILS			-			- *-								4	
		Comments				0	perator Name			Operator Certifica	tion Number		Operator Contac	t Number	
							342859				(484)-431-7297				
SUBMISSION INFOR	*Pursuant to th	ne Pennsylvania	Electronic Transac	ions Act - Act	69, effective J	anuary 15, 2002	2, you are about	to engage in an		1	TELEPHO	ONF		ATE	
GREENPORT USER	electronic tr	ansaction with the	ne Commonwealth ent and all attachme	of Pennsylvani	ia. You are sul	bmitting official i	nformation. You	certify under	Mike Bost	tic	TEEETTI	514E		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	system desig the person	ned to assure the or persons who	at qualified personr manage the syster	el gather and n or those pers	evaluate the insons directly re	nformation subm esponsible for g	nitted. Based on athering the info	your inquiry of rmation, the		- 1	(302)	286-8245	2020	07	28
the person or persons who manage the system or those persons dire information submitted is, to the best of your knowledge and belief, true, statement may be subject to substantial civil and criminal penalties, in		ef, true, accura	accurate and complete. You are aware that any false			SUBMITTED	O BY	AREA CODE	NUMBER	YEAR	10 ON	DAY			



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY	-
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302	
FACILITY:	PENNS PRESERVE STP	
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073	_
STAGE:	Final Effluent	-3

		159640	5			001			
	PERI	MIT NUI	MBER		OUTFALL NUMBER				
			MONITO	DRING I	PERIOD				
	YEAR	МО	DAY		YEAR	МО	DAY		
FROM	2020	07	01	то	2020	07	31		

Reporting Frequency:	Monthly
DMR Effective From:	07/01/2020
DMR Effective To:	07/31/2020
Permit Expires:	02/28/2025
Permit Application Due:	09/01/2024
No Discharge:	

PARAMETER		QUA	NTITY OR LOAD	ING		QUANTITY OR CO	DNCENTRATIC	ON	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMI LING TITL
pH (00400)	Sample Measurement	***	***	***	8.55	***	8.58	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	< 5	< 5	mg/L	1/month	Grab
1	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	< 6.1	***	mg/L	1/month	Grab
	Permit Requirement	***	***		***	Monitor & Report Avg Mo	***		1/month	Grab
Flow (50050)	Sample Measurement	.055351	1.71589	MGD	***	1 ***	***	***	Continuous	Metered
4	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	< 1	***	CFU/100 ml	1/month	Grab
1	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	< 3	< 3	mg/L	1/month	Grab
	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments		*	7					4		



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073

STAGE: Influent

		159640)5			001						
	PERM	ЛІТ NU	MBER		OUTFALL NUMBER							
	MONITORING PERIOD											
	YEAR	МО	DAY		YEAR	МО	DAY					
FROM	2020	07	01	то	2020	07	31					

Reporting Frequency:	Monthly
DMR Effective From:	07/01/2020
DMR Effective To:	07/31/2020
Permit Expires:	02/28/2025
Permit Application Due:	09/01/2024
No Discharge:	

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMI LING ITI L
Flow (50050)	Sample Measurement	.029378	.029378	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments										



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

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File Name				Attachment Type				Uploaded Tin	ne	Attachment Comments							
	2674_001.pd	df				Multiple Atta	chment Types		1	2020-08-28T11:41:2	22-04:00	Attached are the d	laily log sheets for the	log sheets for the influent pump station, spray irrigation plant, and lab result			
ERMIT VIOLATION	S							0									
Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit T	ype Report	ed Value	Permit Limit	Unit	Samplin	ng Point	Cause Of Non-	-Compliance	Correct	orrective Action		omments	
NAUTHORIZED DIS	CHARGES													-			
Non-Compliance ID	Event Start Date	Event End Date	Date and Time Di	scovered	Substance Discharged	Event	Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause C	Of Discharge	Date and Time DEF Orally	Notified	Comments	
THER PERMIT VIO	LATIONS							16					0		3.7		
Non-Compliance ID	Non-Compliance Type Sampling				oint		Para	ameter		Reported Value	ue		Permit Limit		Comments		
OMMENT DETAILS		Comments					0	perator Name		(Operator Certification	n Number	Ţ.	Operato	r Contact Numbe	er	
						kevin brophy			342859				(484)-431-7297				
SUBMISSION INFOR SUBMITTED BY GREENPORT USER	*Pursuant to th	ansaction with th	ne Commonwea	alth of Pen	nsylvania. Yo	u are submit	ting official i	nformation. You		Mike Bost	ic	TELEPH	ONE		DATE		
	system design	ned to assure th	at qualified pers	sonnel gat	ner and evalua	ate the infor	mation subm	upervision in acc nitted. Based on athering the info	your inquiry of	5561	1	(302)	286-8245	2020	08	28	
the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn					SUBMITTED FULL NAM		EA CODE	NUMBER	YEAR	МО	DA						

falsification to authorities).



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY	
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302	
FACILITY:	PENNS PRESERVE STP	
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073	
STAGE:	Final Effluent	7

		159640	5			001	
	PERM	MIT NU	MBER		OUTF	ALL NU	MBER
			MONITO	ORING	PERIOD		
10	YEAR	YEAR MO			YEAR		DAY
FROM	2020	08	01	то	2020	08	31

Reporting Frequency:	Monthly
DMR Effective From:	08/01/2020
DMR Effective To:	08/31/2020
Permit Expires:	02/28/2025
Permit Application Due:	09/01/2024
No Discharge:	

PARAMETER		QUA	NTITY OR LOAD	ING	G	QUANTITY OR CO	ONCENTRATIO	ON	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING ITPE
pH (00400)	Sample Measurement	***	***	***	8.18	***	8.18	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	< 5	< 5	mg/L	1/month	Grab
	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	8.56	***	mg/L	1/month	Grab
	Permit Requirement	***	***		***	Monitor & Report Avg Mo	***		1/month	Grab
Flow (50050)	Sample Measurement	.058421	1.81104	MGD	***	***	***	***	Continuous	Metered
4	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	<1	***	CFU/100 ml	1/month	Grab
	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	3.8	3.8	mg/L	1/month	Grab
	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments						_		1		



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073
STAGE:	Influent

		159640)5			001			
	PERM	MIT NU	MBER		OUTFALL NUMBER				
			MONITO	DRING	NG PERIOD				
	YEAR	МО	DAY		YEAR	МО	DAY		
FROM	2020	08	01	то	2020	08	31		

Reporting Frequency:	Monthly	
OMR Effective From:	08/01/2020	
OMR Effective To:	08/31/2020	
Permit Expires:	02/28/2025	
Permit Application Due:	09/01/2024	
No Discharge:		

PARAMETER		QUA	ANTITY OR LOAD	DING	QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING TIPE
Flow (50050)	Sample Measurement	.038143	.038143	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments								1		



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

	ACH!	MENT	DET	II A	S
- A I I	ACI	AI CIA I		AIL	

	File Name Attachment Type							Uploaded Time Attachment Comments								
	2760_001.p	df				Multiple	Attachment Types	Types 2020-09-28T19:27:48-04:00				Attached are plant log sheets, lab results, and spray irrigation paperwork for the month.				
PERMIT VIOLATIONS	3															
Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Ty	/pe R	eported Value	Permit Limit	Unit	Sampli	ng Point	Cause Of	Non-Compliance	Correct	ctive Action Comments		omments
JNAUTHORIZED DIS	CHARGES					-								·		
Non-Compliance ID	Event Start Date	Event End Date	Date and Time Di	scovered	Substance Discharge		vent Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Wate	ers Cause (Of Discharge	Date and Time DEP Orally	Notified	Comments
THER PERMIT VIO	LATIONS															
Non-Compliance ID	N	Non-Compliance Type Sampling Point Parameter							Reported	Value		Permit Limit		Comments		
OMMENT DETAILS		Comments				T	0	perator Name		Ī	Operator Certific	ation Number	Ī	Operato	r Contact Numb	er
							kevin brophy			342859				(484)-431-7297		
SUBMISSION INFOR SUBMITTED BY GREENPORT USER	*Pursuant to the	ansaction with th	ne Commonwea	alth of Penr	nsylvania.	You are sub	mitting official i	2, you are about nformation. You	certify under	Mike Bosi	tic	TELEPH	ONE		DATE	
	system desig	ned to assure th	at qualified pers	sonnel gath	ner and ev	valuate the in	formation subm	upervision in acc nitted. Based on a athering the infor	your inquiry of	mine Bos		(302)	286-8245	2020	09	2
the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn				SUBMITTED FULL NAM		AREA CODE	NUMBER	YEAR	МО	DA						

falsification to authorities).



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073
STAGE:	Final Effluent

		159640	5			001						
	PERI	MIT NUI	MBER		OUTF	ALL NU	IMBER					
	MONITORING PERIOD											
	YEAR	МО	DAY		YEAR	МО	DAY					
FROM	2020 09		01	то	2020	09	30					

Reporting Frequency:	Monthly
DMR Effective From:	09/01/2020
DMR Effective To:	09/30/2020
Permit Expires:	02/28/2025
Permit Application Due:	09/01/2024
No Discharge:	

PARAMETER		QUA	NTITY OR LOAD	DING		QUANTITY OR CO	DNCENTRATIC	ON	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAWIPLING TIPE
pH (00400)	Sample Measurement	***	***	***	8.54	***	8.54	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	< 5	< 5	mg/L	1/month	Grab
	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	< 3.77	***	mg/L	1/month	Grab
	Permit Requirement	***	***		***	Monitor & Report Avg Mo	***		1/month	Grab
Flow (50050)	Sample Measurement	.041573	1.24719	MGD	***	1 *** 1	***	***	Continuous	Metered
4	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	42	***	CFU/100 ml	1/month	Grab
	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	4.7	4.7	mg/L	1/month	Grab
-	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments								-		



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073
STAGE:	Influent

		159640	5			001							
	PERM	MIT NU	MBER		OUTFALL NUMBER								
		MONITORING PERIOD											
	YEAR	МО	DAY		YEAR	МО	DAY						
FROM	2020	09	01	то	2020	09	30						

Reporting Frequency:	Monthly
DMR Effective From:	09/01/2020
DMR Effective To:	09/30/2020
Permit Expires:	02/28/2025
Permit Application Due:	09/01/2024
No Discharge:	

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR CO	ONCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE
FARAWETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	
Flow (50050)	Sample Measurement	.0322	.0322	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Facility Sampling Point Comments							Y			



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ACH!	MENT	DET	ΔII	S

File Name					A	Attachment Type			Uploaded Tim	ne	Attachment Comments				
	2827_001.p	df			Multip	le Attachment Types		4	2020-10-28T16:06:1	0-04:00					
ERMIT VIOLATIONS	S														
Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Typ	pe Reported Value	Permit Limit	Unit	Samplir	ng Point Cause Of Non-Compliance		Correct	Corrective Action		mments	
NAUTHORIZED DIS	CHARGES														
Non-Compliance ID	Event Start Date	Event End Date	Date and Time Dis		ed Substance Event Location Volume (gal) Duration (hrs) Discharged					Impact On Waters	Cause Of I	Discharge	Date and Time DEP Orally	Notified	Comments
THER PERMIT VIO	LATIONS						1							1.7	
Non-Compliance ID Non-Compliance Type Sampling Poi							Para	ameter		Reported Value			Permit Limit		Comments
OMMENT DETAILS		Comments			T-		Operator Name		C	Operator Certification No	umber	T-	Operato	Contact Number	
						Kevin Brophy			342859				(484)-431-7497		
UBMISSION INFOR SUBMITTED BY GREENPORT USER	*Pursuant to the	ansaction with th	ne Commonweal	Ith of Penn	t - Act 69, effective only	bmitting official	information. You	certify under	Mike Bosti	ic	TELEPHOI	NE		DATE	
	system desig	ned to assure th	at qualified perse	onnel gathe	re prepared under your er and evaluate the i se persons directly i	information subr	nitted. Based on	your inquiry of	5 500.	1	02)	286-8245	2020	10	2
bosticm	information su	ıbmitted is, to the	e best of your kn o substantial civi	owledge ar il and crimi	nd belief, true, accur nal penalties, includ	ate and complet	te. You are awar	e that any false	SUBMITTED FULL NAM		CODE	NUMBER	YEAR	МО	DA

falsification to authorities).



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073
STAGE:	Final Effluent

		159640	5		001 OUTFALL NUMBER						
	PERI	MIT NU	MBER								
	MONITORING PERIOD										
10	YEAR	МО	DAY		YEAR	МО	DAY				
FROM	2020	10	01	то	2020	10	31				

Reporting Frequency:	Monthly	
DMR Effective From:	10/01/2020	
DMR Effective To:	10/31/2020	
Permit Expires:	02/28/2025	
Permit Application Due:	09/01/2024	
No Discharge:		
	-1	

PARAMETER		QUA	NTITY OR LOAD	DING		QUANTITY OR CO	NCENTRATIC	ON	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAWIPLING TIPE
pH (00400)	Sample Measurement	***	***	***	6.78	***	6.78	S.U.	1/month	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	< 5	< 5	mg/L	1/month	Grab
1	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	< 3.77	***	mg/L	1/month	Grab
	Permit Requirement	***	***		***	Monitor & Report Avg Mo	***		1/month	Grab
Flow (50050)	Sample Measurement	.042232	1.267	MGD	***	1 ***	***	***	Continuous	Metered
4	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	42	***	CFU/100 ml	1/month	Grab
1	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	4.7	4.7	mg/L	1/month	Grab
-	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments		*	* *					4		



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073
STAGE:	Influent

		159640	5		001 OUTFALL NUMBER				
	PERM	MIT NU	MBER						
			MONITO	PERIOD					
- 3	YEAR	МО	DAY		YEAR	МО	DAY		
FROM	2020	10	01	то	2020	10	31		

Reporting Frequency:	Monthly	
DMR Effective From:	10/01/2020	
DMR Effective To:	10/31/2020	
Permit Expires:	02/28/2025	
Permit Application Due:	09/01/2024	
No Discharge:		
	- (-	

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE	
FARAIVIETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMPLING TIPE	
Flow (50050)	Sample Measurement	.0312	.0312	MGD	***	***	***	***	Continuous	Metered	
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered	
Facility Sampling Point Comments	5						Y				



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

	MFNT	

File Name	Attachment Type	Uploaded Time	Attachment Comments
Penns.TIF	Influent and Process Control Form	2020-12-01T13:48:17-05:00	
DEDMIT VIOLATIONS			

PERMIT VIOLATIONS

	Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments
-												

UNAUTHORIZED DISCHARGES

	1	Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified	Comments
--	---	-------------------	------------------	----------------	--------------------------	-------------------------	----------------	--------------	----------------	------------------	------------------	--------------------	----------------------------	----------

OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments
126107	Late DMR Submission					DEP had issues with their Greenport system so we were asked to submit the monthly DMR by mail, which we did. Now after the due date we are being asked to submit the eport electronically.

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
	kevin brophy	342859	(484)-431-7297

SUBMISSION INFORMATION

SUBMITTED BY GREENPORT USER	*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under	Mike Bostic	TELEPHO	NE		DATE	,
	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of		(302)	286-8245	2020	12	01
bosticm	the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073

Final Effluent

1596405 001
PERMIT NUMBER OUTFALL NUMBER

 MONITORING PERIOD

 YEAR
 MO
 DAY
 YEAR
 MO
 DAY

 2020
 11
 01
 TO
 2020
 11
 30

FROM

Reporting Frequency: Monthly

DMR Effective From: 11/01/2020

DMR Effective To: 11/30/2020

Permit Expires: 02/28/2025

Permit Application Due: 09/01/2024

No Discharge:

PARAMETERS REPORTED VALUES

STAGE:

PARAMETER		QUA	NTITY OR LOAD	ING		QUANTITY OR CO	NCENTRATIC	ON	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING ITPE
pH (00400)	Sample Measurement	***	***	***	***	***	***	S.U.		
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	***	mg/L		
1	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	Monitor & Report Avg Mo	***		1/month	Grab
Flow (50050)	Sample Measurement	***	***	MGD	***	***	***	***		
4	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	***	***	CFU/100 ml		
1	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX		1/month	Grab
Facility Sampling Point Comments			* *			,		4		



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073
STAGE:	Influent

		159640	5			001	
	PERM	MIT NU	MBER		OUTF	ALL NU	MBER
Н			MONITO	ORING	PERIOD		
	YEAR	МО	DAY	7	YEAR	МО	DAY
FROM	2020	11	01	то	2020	11	30

Paparting Fraguency	Monthly
Reporting Frequency:	Monthly
DMR Effective From:	11/01/2020
DMR Effective To:	11/30/2020
Permit Expires:	02/28/2025
Permit Application Due:	09/01/2024
No Discharge:	

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE	
FARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMPLING TIPE	
Flow (50050)	Sample Measurement	.0342	.0342	MGD	***	***	***	***	Continuous	Metered	
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered	
Facility Sampling Point Comments	- C						Y				

ATTACHMENT DETAILS



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

	File Name		- 1		Att	achment Type			Uploaded Ti	ne		Attachment Comments	
	2946_001.pdf	f			Influent and	d Process Control Forr	n		2020-12-17T06:46:	00-05:00			
PERMIT VIOLATIONS	S												
Non-Compliance ID	4	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Samp	ing Point	Cause Of Non-Co	ompliance Cor	rective Action	Comments
NAUTHORIZED DIS		Event End Date	Date and Time Dis		stance E	vent Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified Orally	Comments
THER PERMIT VIO								+					
Non-Compliance ID	No	on-Compliance Typ	e]	S	ampling Point		Para	meter		Reported Value		Permit Limit	Comments
OMMENT DETAILS													

Operator Name

kevin brophy

SURMISSION	LINICADA	ATION

SUBMITTED BY GREENPORT USER		Mike Bostic	TELEPHO	ONE		DATE	
1	penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the		(302)	286-8245	2020	12	17
bosticm	information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY

Operator Certification Number

342859

Operator Contact Number

(484)-431-7297



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

1596405

PERMIT NUMBER

NAME: WILLISTOWN TWP CHESTER CNTY

ADDRESS: 688 SUGARTOWN RD, MALVERN PA, 19355-3302

FACILITY: PENNS PRESERVE STP

LOCATION: 5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073

 MONITORING PERIOD

 YEAR
 MO
 DAY
 YEAR
 MO
 DAY

 FROM
 2020
 12
 01
 TO
 2020
 12
 31

OUTFALL NUMBER

Reporting Frequency: Monthly

DMR Effective From: 12/01/2020

DMR Effective To: 12/31/2020

Permit Expires: 02/28/2025

Permit Application Due: 09/01/2024

No Discharge:

PARAMETERS REPORTED VALUES

Final Effluent

STAGE:

PARAMETER		QUA	NTITY OR LOAD	ING	C	QUANTITY OR CO	NCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING TIPE
pH (00400)	Sample Measurement	***	***	***	***	***	***	S.U.		
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		1/month	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	***	mg/L	and the second s	
	Permit Requirement	***	***		***	30 Avg Mo	60 IMAX		1/month	Grab
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	Monitor & Report Avg Mo	***		1/month	Grab
Flow (50050)	Sample Measurement	***	***	MGD	***	***	***	***		
4	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Total Mo		***	***	***		Continuous	Metered
Fecal Coliform (74055)	Sample Measurement	***	***	***	***	***	***	CFU/100 ml		
1	Permit Requirement	***	***		***	200 Geo Mean	***		1/month	Grab
Carbonaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	25 Avg Mo	50 IMAX	1	1/month	Grab
Facility Sampling Point Comments			,			*			-	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

NAME:	WILLISTOWN TWP CHESTER CNTY
ADDRESS:	688 SUGARTOWN RD, MALVERN PA, 19355-3302
FACILITY:	PENNS PRESERVE STP
LOCATION:	5316 WEST CHESTER PIKE, NEWTOWN SQUARE PA, 19073
STAGE:	Influent

	-	159640 MIT NU			OUTF	001 ALL NU	MBER
			MONITO	PERIOD			
	YEAR	МО	DAY		YEAR	МО	DAY
FROM	2020	12	01	то	2020	12	31

eporting Frequency:	Monthly	
MR Effective From:	12/01/2020	
MR Effective To:	12/31/2020	
ermit Expires:	02/28/2025	
ermit Application Due:	09/01/2024	
lo Discharge:		

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR C	ONCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE	
FARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING PREQUENCY	SAMPLING TIPE	
Flow (50050)	Sample Measurement	.041911	.041911	MGD	***	***	***	***	Continuous	Metered	
	Permit Requirement	.045 Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered	
Facility Sampling Point Comments	5				-						



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETA	ILS
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File Name						Attac	chment Type			Uploaded Time Attachment Comments							
	3137_001.pd	df				Influent and I	Process Control For	rm	1	2021-01-28T10:28:4	17-05:00						
ERMIT VIOLATIONS	3																
Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit T	ype Repo	rted Value	Permit Limit	Unit	Sampli	ng Point	Cause Of N	n-Compliance	Correct	ive Action		Comments	
NAUTHORIZED DIS	CHARGES													7			
Non-Compliance ID	Event Start Date	Event End Date	Date and Time Dis	scovered	Substance Discharged	Eve	ent Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause (Of Discharge	Date and Time DEF Orally	Notified	Comments	
THER PERMIT VIOL	LATIONS																
Non-Compliance ID	N	Ion-Compliance Typ	e		Sampling Point Parameter						Reported V	alue	Permit Limit			Comments	
OMMENT DETAILS																	
OMMENT DETAILS		Comments				T	0	perator Name			Operator Certificat	on Number	Ţ	Operato	r Contact Nu	mber	
OMMENT DETAILS		Comments						perator Name Kevin Brophy		C	Operator Certificat 342859	on Number			r Contact Nui 84)-431-7497	mber	
UBMISSION INFOR	MATION					J		Kevin Brophy		C	•	on Number				mber	
	MATION *Pursuant to the electronic transfer.	e Pennsylvania	ne Commonwea	alth of Pen	nsylvania. Yo	u are subr	nuary 15, 2002 mitting official ii	Kevin Brophy 2, you are about to nformation. You	certify under	Mike Bosti	342859	on Number TELEPH	ONE				
UBMISSION INFOR	*Pursuant to the electronic tropenalty of law system design	e Pennsylvania ansaction with the that this documented to assure the	ne Commonwea ent and all attac at qualified pers	alth of Pen hments wo sonnel gat	nsylvania. Yo ere prepared her and evalu	ou are subrunder you under you nate the inf	nuary 15, 2002 mitting official in r direction or si	Kevin Brophy 2, you are about	certify under cordance with a your inquiry of		342859		ONE 286-8245		84)-431-7497		